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The Role of Shared Identity in Social Support Among Refugees of Conflict: Case of Syrian Refugees in Middle East

Thesis submitted by Khalifah H. Alfadhli to the University of Sussex for the qualification of Doctor of Philosophy in Psychology, March 2018

I hereby declare that this thesis has not been and will not be, submitted in whole or in part to another University for the award of any other degree.

Signature:.....

University of Sussex

Khalifah Alfadhli, submitted for the award of Doctor of Philosophy in Psychology

The Role of Shared Identity in Social Support Among Refugees of Conflict: Case of Syrian Refugees in Middle East

Summary

Forced displacement is the crises of our time as it has reached an unprecedented magnitude and rate, which exceeds the capacity of the international relief system and required efforts from global citizens, institutions, governments and communities. Social psychology has an important role in this needed mass response, to provide a better understanding of how the forcibly displaced people deal with their situation and how they are affected by it. Taking into consideration the sharp gap of resources available to the international relief system, it is especially important to understand the natural mechanisms of support the affected communities have, which can be an effective tool to build more efficient interventions and to empower marginalised communities and individuals.

This research project aims to explore one possible mechanism underlining social support among refugees of conflict in developing countries, and sought to answer three main questions: how refugees help each other? Does sharing an emergent identity of being a "refugee" facilitate support among them, similar to people affected by disasters? Does this shared identity-based support impact their health? After conducting a systematic literature review (Paper 1) of psychosocial support among refugees of conflict in developing countries, we identified that the main challenge was the stressors arising from the exile environment (secondary stressors) and found indications of shared identity-based support among them.

To do further exploration with social identity in mind, we conducted an 8-month ethnography (Paper 2) with Syrian refugees in Jordan that revealed an emergent shared

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"refugee" identity which seems to stem from a sense of common fate and motivates providing help to other refugees in addition to creating new social networks in exile that facilitates support efficiently. To better understand the secondary stressors (Paper 3), we conducted a survey (N = 305) and combined it with ethnographic data to find that Syrian refugees in Jordan suffer the most from financial stressors, due to loss of income and high living expenses; environmental stressors arise from exile and are either circumstantial (e.g., services and legal requirements) or created by this environment (e.g., instability and lack of familiarity); social stressors, directly related to social relations (e.g., discrimination & exploitation). In order to explore the process of support and the exact role of shared identity, we conducted two surveys (Paper 4) among Syrian refugees in Jordan (N = 156) and Turkey (N = 234) and used path analysis to build a model, which suggested that shared social identity is an important predictor of providing support and collective efficacy, which in turn has a positive association with general health of the refugees. We found indications that such positive associations could have a buffering effect in counter to the negative effect of stressors and stress on the health of refugees.

We do acknowledge the stigmatic nature of a "refugee" identity and that there are other sources of support among the refugees. Nevertheless, we suggest that shared social identity can be a valuable resource in the field of psychosocial support among refugees of conflict in developing countries, especially if incorporated in the design of community level intervention.

Arabic Summary

جامعة ساسكس, المملكة المتحدة أطروحة مقدمة من خليفة بن حميد الفضلي للحصول على درجة الدكتوراه في علم النفس

دور الهوية المشتركة في الدعم الاجتماعي عند لاجئي الحروب في الدول النامية: حالة اللاجئين السوريين في الشرق الأوسط

ملخص

النزوح القسري يمثل الأزمة الإنسانية الكبرى في عصرنا، حيث وصلت أعداد النازحين ومعدّلات النزوح حدّا ٍغير مسبوق منذ الحرب العالمية الثانية، ما يتخطى إمكانات مؤسسات الإغاثة الدولية ويستلزم جهودا إضافية من المهتمين أفراداً ومؤسساتٍ وحكوماتٍ ومجتمعاتٍ. ويمكن لعلم النفس الاجتماعي أن يلعب دورا هاما في هذه الاستجابة الشاملة من خلال تقديم فهم أفضل لكيفية تأثر النازحين قسريا بالظروف التي تواجههم وكيفية استجابتهم لتلك الظروف وإذا ما استحضرنا القصور الحاد في موارد مؤسسات الإغاثة الدولية في مواجهة أزمة النزوح، فإنه يتبين لنا مدى أهمية فهم آليات الدعم الاجتماعي الموجودة تلقائيا في المجتمعات المتضررة، ما يقود إلى تدخلات وبرامج أكثر كفاءة وإلى تمكين المهمِّشين أفرادا وجماعات. يهدف هذا المشروع البحثي إلى الكشف عن إحدى أليات الدعم الاجتماعي بين لاجئي الحروب في الدول النامية، من خلال الإجابة على تساؤلات ثلاث: ما صور دعم اللاجئين لبعضهم؟ هل يؤدي تبنّي الهوية المستجدة "لاجيء" إلى تسهيل الدعم الاجتماعي بين اللاجئين، أسوة بضحايا الكوارث؟ هل يؤثر هذا الدعم القائم على الهوية المشتركة على صحَّة اللاجئين؟ بعد إجراء مراجعة منهجية للأدبيات (البحث الأول) حول الدعم النفسي الاجتماعي بين لاجئي الحروب في الدول النامية وجدنا أن التحديات الكبري التي تواجههم هي الضغوط الناشئة عن بيئة المنفى (الضغوط النفسية الثانوية)، كما عثرنا على إشارات لوجود أليات دعم قائمة على الهوية المشتركة بين اللاجئين. لدراسة مثل هذه الأليات بالتركيز على الهوية الاجتماعية، قمنا بعمل دراسة إثنو غرافية (البحث الثاني) لمدة ثمانية شهور مع اللاجئين السوريين في الأردن والتي كشفت أن اللاجئين يتشاركون الهوية المستجدة "لاجيً" والتي تبدو مبنيّة على إحساس بالمصير المشترك، حيث تحفز هذه الهوية المشتركة تقديم الدعم للاجئين الأخرين، بالإضافة لدور ها في خلق شبكة علاقات اجتماعية جديدة في المنفى والتي تسهّل الدعم بكفاءة عالية. لتحقيق فهم أفضل للضىغوط النفسية الثانوية (البحث الثالث) قمنا بإجراء مسح (استبانة شملت ٣٠٥ مشارك) ضمن اللاجئين السوريين في الأردن, حيث ضمّت بياناتها إلى بيانات كيفية من الدراسة الاثنو غرافية, كشفت أن اللاجئين السوريين يعانون بشكل كبير من الضغوط المالية نظرا لفقدان الدخل وارتفاع تكلفة المعيشة في الأردن, تليها الضغوط البيئية التي مصدر ها بيئة المنفى سواء ظروفا معيشية (مثل: الخدمات أو المتطلبات القانونية) أو كانت ضغوطًا ناتجة عن تلك الظروف (مثل: عدم التاقلم وعدم الاستقرار), وأخيرا الضىغوط الاجتماعية الناتجة بشكل مباشر عن العلاقات الاجتماعية (مثل: التمييز والاستغلال). و في سبيل اكتشاف آلية الدعم الاجتماعي وتحديد الدور الذي تلعبه الهوية المشتركة في تلك الألية قمنا بإجراء دراستين (البحث الرابع) تشمل مسح (استبانة شملت ٢٣٤ مشارك) ضمن اللاجئين السوريين في تركيا ومسح (استبانة شملت ١٥٦ مشارك) ضمن اللاجئين السوريين في الأردن, واستخدمنا منهجية تحليل المسارات لبناء نموذج أظهر دلائل أولية على أن الهوية المشتركة عاملا مهما يتنبأ بتقديم المساعدة بالإضافة إلى ارتفاع الاحساس بفاعلية الجماعة والتي بدورها ترتبط ايجابا بالصحة العامة للاجئين. وقد وجدنا دلائل أولية على أن هذا الارتباط الإيجابي قد يكون له أثر مضاد للأثر السلبي على صحة اللاجئين الناتج عن الضغوطات الثانوية (التي تسبب المشقَّة).

ندركَ جيدا طبيعة الوصمة المرتُبطة بهوية "لاجئْ"، كما نقرّ بأنّ هنالك مصادر أخرى للدعم بين اللاجئين عدا هذه الهوية. على الرغم من ذلك، نقترح أن الهوية الاجتماعية المشتركة يمكن أن تكون مصدرا قيّما في مجال الدعم النفسي الاجتماعي بين لاجئي الحروب في الدول النامية، وخاصّة إن تم إدراجها ضمن برامج موجهة على مستوى المجتمعات المحلية.

هذه الأطروحة مهداة إلى اللاجئين

This work is dedicated to

The Refugees

"Think upon Others"

A poem by Mahmoud Darwish

When you prepare your breakfast, think upon others Do not forget to feed the pigeons When you engage in your wars, think upon others Do not forget to demand peace As you pay your water bill, think upon others! Who seek sustenance from the clouds, not a tap And when you return to a house – your house – think upon others Such as those who live in tents When you fall asleep counting sheep, think upon others Who cannot find a space for sleeping And as you search for meaning with fancy metaphors, think upon others Who have lost their right to words And while you think of faraway others, think of yourself And say: I am a candle to this darkness

Acknowledgments

I would like to start by thanking the most important people in my life, who supported my long educational journey that took me away from them when I was most needed. I cannot thank enough my beloved family, especially my wife, Alaa AlBeayeyz, who provided tremendous emotional and practical support throughout my PhD.

My PhD journey would not be possible without the highly appreciated support of my supervisor, Dr John Drury, who believed in me and my decisions and offered crucial support and valuable feedback whenever needed. I do believe that such exceptional academic support goes beyond the expectations of a supervisor's duty and it is not the only side that I appreciate in John.

John's Crowds and Identities Research Lab indeed practices what it preaches; its wonderful members gave me a sense of belonging since my arrival, which is very important to an international student like myself. This group offered me an anchor during my PhD years with much needed advice, collaborations and mutual support on-campus and off-campus. One essential part of my experience in Sussex is the countless dinners we had together where we celebrated academic achievements, birthdays or simply got together. Thank you Sanj Choudhury, Hani Alnabulsi, Patricio Saavedra, Evangelos Ntontis, Selin Tekin, Sara Vestergren and Anne Templeton.

The fieldwork I have done as part of this research project has left a deep impression on me in many ways. One aspect of that experience was to get to know and live with kind people that I considered a blessing, although it made my departure harder. I'm grateful to my Syrian friends who invited me into their homes and private areas of their memories, whom I cannot name. I'm also grateful to the extraordinary people that showed amazing efforts in the face of adversity and who also offered crucial help during my fieldwork. There were many of those, but I would like to especially thank Ishak Assoufei and Abdullah Aljbour.

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Statement of Context

This thesis has been prepared in the format of papers for publication, with the exception of the overview chapter that provides an overview of the thesis as a whole. At the time of the dissertation submission, paper 1 has been published, paper 2 and 3 got published after the viva, while papers 4 in the review process by journals.

The full reference of each paper is included on the title page of each chapter. Given the format of this thesis, the text within the chapters is identical to the submitted or published papers. However, to avoid repetition, I have created a single reference list at the end of the thesis. I have also numbered the tables and figures to be consistent with the chapter numbers and then sequentially within each chapter (e.g. 1.1, 1.2, 2.1, 3.1, etc...).

The published papers within this thesis all have myself and my supervisor, Dr John Drury as authors, with the exception of paper 4, which includes Meltem Güler and Huseyin Cakal as coauthors. I am the lead author on all papers, which represents the fact that in all of the papers I analysed the data collected and wrote the first draft of the paper. I then received comments from my supervisor, which I addressed in subsequent drafts of the paper. In the studies included in the papers, I also collected the data which I subsequently analysed. The only exception to this, is study 1 in paper 4. The data presented in study 1 of paper 4 had been collected by a collaborator working with Syrian refugees in Turkey under my instructions. However, as in other chapters, I analysed the data presented in study 1, wrote the first draft, received comments from my supervisor and co-authors, which I then addressed in subsequent drafts of the paper.

The order of the papers in this thesis is based on the chronological order of the studies conducted as part of this research project. The first study was a systematic critical literature review, which is found in paper 1. The second study was an ethnography with Syrian refugees in Jordan, where the analysis has been divided between two papers; the main part of the analysis "social support and shared identity" was used in paper 2; the remaining part of

the analysis (challenges of exile) was combined with a later survey in an effort to establish a tool to measure secondary stressors (paper 3). The last study in this project was a survey among Syrian refugees in Jordan that used the secondary stressors scale in addition to other scales adopted from the literature of shared identity-based support in disasters. The only exception of the chronological order was a survey conducted in parallel with the ethnography, to do an initial test of the measures and look for initial evidence of shared identity-based support among Syrian refugees in Turkey. The analysis of this study was combined with the analysis of the last study in paper 4.

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1. The Overview Chapter

The main aim of this chapter is to give an overview of this PhD thesis, and the studies involved in the research project, in five sections. First, I will shed some light on the refugees' crisis and review the literature on the psychosocial aspect of refugees of conflict situations, especially in relation to stressors arising from exile in developing countries. After defining the scope and the main research questions, I will then move to the second section of this chapter to explain the research strategy that was adopted to answer our guiding research questions, and how this strategy developed during different stages of the project. Third section will provide contextual descriptions of the ethnography setting as I experienced it within the refugees' community. Fourth section will discuss the papers included in this research project, which constitutes of four journal papers; starting from paper 1, which is a critical systematic literature review of psychosocial support among refugees of conflict in developing countries; paper 2 that includes an ethnography with Syrian refugees to explore the dynamics of social support and social identity among a refugee community; then paper 3, which aimed to build a framework to understand and measure secondary stressors (exile stressors); and finally paper 4 quantitatively examined the process of shared identity-based support and its possible impact on the well-being of the refugees. In the last chapter, I will aim to discuss the results, make conclusions in addition to highlighting limitations and contributions of this research project.

I wrote my dissertation following the format of journal papers that I found helpful, in many ways. In addition to the academic credit and receiving valuable reviewers' feedback, it helped me to develop the skills of continuous and focused writing. However, I also came to realise the downside and limitations of this approach when some important segments of the refugees' experience came to be fragmented, only because it did not fit the mould of the journal article (e.g., word count). A clear example of such compromise is when I decided to break my ethnography analysis into two papers because it was too large for one journal

article, even after I cut down many good interview extracts. This led to the fact that the refugees' experience – as captured in the ethnography – is now read in two separate themes (the challenges & the support), which complement each other.

In this chapter (especially the stage section), I hope to restore a sense of narrative that seeks to express an experience of refugees in addition to my research experience.

A Personal Note

When I was a boy during the 80s, I remember watching T.V. news about the many wars going on in our region (Iraq-Iran war, Lebanon civil war and the Palestinian Intifada) and thinking, "I wouldn't survive even a day in a warzone!" I had no idea that a few years later (1990) I would be living in a warzone myself. When I was 12 years old, Iraq invaded Kuwait, where my family used to live, and we got trapped inside Kuwait which turned into one big war front including constant bombing. We survived the war with many stories to tell, but I got two important insights from that experience; people have an incredible psychological resilience to deal with hardships and people are capable of showing exceptional solidarity in the most difficult times.

When I started the first draft of my PhD proposal in 2013, the number of Syrian refugees was around two million and for a few years, I kept updating my presentation slides by adding roughly 1 million more every year. The Syrian crisis is the crisis of our generation that echoes other major humanitarian crises in modern history. These major crises have overwhelmed any existing system of humanitarian response at that time, and thus created better ways of response. One example is the 1951 refugee convention in the aftermath of World War II (United Nations High Commissioner for Refugees [UNHCR], 2011). A second example is the United Nation agencies and guidelines that was formed after the burst of armed conflict in the 90s (e.g., Afghanistan, Rwanda, Bosnia; Themnér & Wallensteen, 2012). Such extraordinary response requires substantial contributions from people outside the relief work field to meet the need for both extra hands in addition to fresh pair of eyes for a better understanding and developing new ways of doing things. This research project is an attempt to contribute by building a thesis to understand one aspect of social support among the refugees' community, while trying to help directly by engaging in some volunteer work during the field work.

1.1. Literature Review

1.1.1. World in Crisis

Forced displacement crisis is the main humanitarian challenge of our time, manifested in record numbers of displaced people that spiked rapidly in recent years (65% in the last 5 years; UNHCR, 2017a), mainly due to armed conflicts in the Middle East, which includes both the largest and fastest-growing sources of refugees.

In the most recent report of the global trends of forced displacement, the United Nations High Commissioner for Refugees (UNHCR, 2017a) shows that there are more than 65 million people that have been forcibly displaced, and more than 10 million of them are newly displaced. Most of the affected population are displaced internally (40 million) in addition to 25 million refugees, most of them (84%) are hosted in developing countries. Refugees are not expected to return to their homelands soon as 68 percent of them have spent more than five years in exile and are expected to spend more than 20 years on average (UNHCR, 2016a).

The Middle East has been a major area of unrest since the beginning of the last century when the Ottoman empire collapsed only to be substituted by European colonial powers. The region has always had on-going wars; starting from independence revolutions in the first half of the 20th century, and after the independence (e.g., Syria 1946, Libya 1951, Egypt 1952 and Algeria 1962) came a new wave of inter-state wars (e.g., Arab-Israel wars 1948, 1967, 1973 and Iran-Iraq war 1980-1988) or as civil wars (e.g., Lebanon 1975-1990). Unfortunately, this century was also in turmoil for the Middle East with updated versions of the colonial wars (anti-terrorist, e.g., Iraq invasion 2003-2011) and internal conflicts like the Arab spring in 2011 that included many countries, especially Tunisia, Egypt, Libya, Yemen and Syria.

In addition to being a highly combustible region that consistently produced a trail of tears crossing the borders whenever a new conflict erupted, the Middle East has also been characterised by a consistently changing map of conflicts by swapping roles in a matter of a few years, where major refugee hosts turn to be major refugee producers.

The main focus of this research project is the communities of urban Syrian refugees in the neighbouring countries (i.e., Lebanon, Jordan, Turkey and Iraq), where millions of Syrians crossed the borders fleeing the war, only to be trapped for years in unsustainable situations for them and the hosting countries. This research project includes four studies, three of them were among Syrian refugees in Jordan, which makes it the main stage.

With the rise of the Arab Spring in January 2011, a mass wave of peaceful protests took down its first dictator in Tunisia, only to continue through to the second dictator in Egypt in the next month. By March it seemed that the Arab spring was gaining momentum and more domino pieces were in line to fall, with mass protest spreading to Libya, Yemen and Syria. Syria at that time had a population of 21 million and was ruled by an oppressive one-party political system that decided to face the protests with military force. By early 2012, the situation in Syria turned to a highly destructive civil war that was also a proxy war for many regional and global powers. The UNHCR Syria regional refugee response website shows that since March 2012, the number of Syrian refugees in the Middle East started to build-up until it recently reached 5.5 million (UNHCR, 2018a).

The neighbouring countries opened their borders to millions of Syrian refugees which posed tremendous pressure on countries that already had fragile economical and political situations in a volatile region. One clear example comes from Iraq, which produced multiple waves of mass forced displacement to neighbouring countries due to the 1990 Gulf war and then falling under occupation in 2003; more than a million Iraqis sought refuge in Syria (Al-Miqdad, 2007) which was the world's third largest host of refugees at that time (UNHCR,

2012). Then, in a few years, Syria became the largest source of refugees (UNHCR, 2016a); 244,600 of them are currently hosted in Iraq (UNHCR, 2016a). The hosting countries' capacities to provide support to large numbers of refugees – if existed – have been exceeded through many years of displacement, especially in small countries where refugees constitute a large portion of the total population (e.g., Lebanon with 180 refugees per 1000 inhabitant; UNHCR, 2017a).

The international organizations led by the UN played a crucial role in responding to aid the forcibly displaced people affected by armed conflicts. However, although these efforts succeed in saving lives, it seems to fail in providing livelihood. On clear aspect of the failure to provide sustainable support to refugees is that these programs are severely underfunded (Figure 1.1)

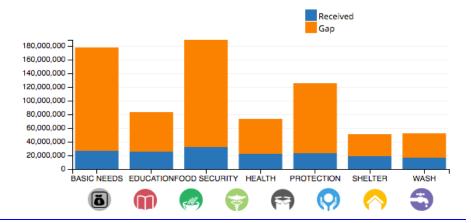


Figure 1.1: UNHCR global budget distribution of received funds/gap, across sectors (UNHCR, 2018b)

Due to the recognized stress on the resources of both hosting countries and international NGOs, it is necessary to look for new sources to support the large number of refugees on a prolonged displacement in developing countries, and one valuable source for such support lays within the refugees themselves.

1.1.2. Facing exile as a group

Escaping the war is not the end of the refugees' worries, as most of them seek refuge in tough situations with many challenges of unemployment, high living cost, poor services, overloaded infrastructures, unfamiliar environment and being suspended in uncertainty for years. Refugees become vulnerable in such harsh conditions due to the fact that many of them left their homes in haste to escape war with little belongings and savings, thinking that they will return in a few months after the war ends. Such fragile resources do come in handy to soften the landing shock but not to survive during the extended years of exile away from homes, jobs and a social safety net. However, it is not only the refugees who made the mistake of dealing with displacement as a temporary situation and facing it with an emergency-approach, as we find many hosting countries resist refugee integration solutions and international NGOs fail to provide sustainable support to the refugees.

Some of the stressors mentioned above could be due to the general environment of exile (e.g., high unemployment rate) but some of them are specifically problems of having the "refugee" status (e.g., work restrictions). These exile-specific stressors could highlight the refugee identity of displaced people as they go through situations that single them out and treat them as a group, regardless of their previous (pre-war) social backgrounds and affiliations, as studies showed that sharing distress increases identification (Vezzali, Drury, Versari, & Cadamuro, 2016; Vezzali, Versari, Cadamuro, Trifiletti, & Di Bernardo, 2016). In addition to being treated as a group, refugees also – in many cases – respond to challenges by feeling and acting as a group that have a common struggle going on for years. Sharing challenges and encountering the same treatment from the local authorities may help create a common identity among the undocumented and asylum seekers in Brazil (Moulin, 2010). This division in treatment of refugees may lead to creating an independent social group identity, which sometimes manifests in social activities and spaces inclusive to diverse

refugees and exclusive to the non-refugees, as in the case of Sudanese alcohol *Aragi* consumption spaces which are forbidden for Egyptian locals (Curley, 2009).

Internal cohesion among the refugees brings crucial benefits to them by not only helping them to situate their painful experience within a collective memory narrative (Buyer, 2008), but also provides them with practical support that require collective efforts. One example of such support is found among the undocumented refugees in Lebanon, who are denied access to the governmental health system and thus provide each other with alternative medical services through an extended social network that offers monetary hand-outs, loans, payment for medical bills, transportation and calls for blood donation (Chatty, Mansour, & Yassin, 2013). Another example comes from Thailand, where Vietnamese social networks offered the refugees agency by providing the new refugees with work, in spite of the policy constraints (Palmgren, 2013).

1.1.3. Role of Social Identity

Social Identity basis of Collective Resilience. Social identity is an important concept when trying to understand the refugees' experience, as displacement not only includes changes in location with different needs, but also a radical change in social relations and more importantly, change in the perception of self and others. Forcibly displaced people acquire a new label - "refugee" - upon crossing the borders for official use and must present themselves using this label in daily life (e.g., at police road blocks or to receive health services). With prolonged common distress and experiences that treat them indiscriminately as one group regardless of their backgrounds, refugees sometimes start to feel and act as a group with a common interest.

Sharing distress as a base of identification could be linked to a serious criticism to a foundation of our thesis (psychological group base for collective behaviour) by suggesting

that collective and cooperative behaviour is merely based on interdependency and motivated by self-interest (Rabbie & Horwitz, 1988). However, Social Identity Theory (SIT) suggests that there are more to groups than inter-dependency and that this approach's individual-level of interpretation reduces the group into a collection of similar individuals as defined by an outside observer. The interdependency approach ignores psychological aspects of the groups (e.g., cognitive representations and concepts) essential to explain group processes (e.g., attraction, influence and cooperation) that have been shown not to require personal contact or interdependency (Turner & Bourhis, 1996). For the social identity approach, interests flow from shared identity, where inter-dependence (e.g., common fate) can operate as a criterion for that identity (Turner, 1982).

This new shared identity that becomes salient in distressing settings can be a valuable resource for mutual support and empowerment, an argument that is in line with SIT. SIT defines social identity as "part of an individual's self-concept which derives from his knowledge of his membership of a social group (or groups) together with the emotional significance attached to that membership" (Tajfel, 1974, p. 69). Self-Categorization Theory (SCT) explains how the shift from personal identity to social identity involves *self-stereotyping*, where the individuals start to see themselves as interchangeable members of the social category (Turner & Reynolds, 2010). *Others' interest* becomes 'our interest' because we now share selfhood, and which is therefore crucial to achieve the common goals. Neville and Reicher (2011) differentiate between two aspects of social identity, where the individuals can identify with the social category - 'self-categorization' - and also can perceive others around them as members of that social category - 'shared identity'; they emphasise that benefit of identity-based processes (e.g., support, validation and sense of purpose) are determined by the latter.

These positive outcomes of identification can offer explanations for important phenomena in the settings of mass emergencies, where studies have found that distressful events can be a source of shared identification (Vezzali, Drury, Versari, & Cadamuro, 2016). Other studies have documented emergent prosocial behaviours in emergencies and disasters (e.g., Rodríguez, Trainor, & Quarantelli, 2006), which could be facilitated by such shared identity to establish a relationship between strangers who share the same situation. Research on group processes in disasters (see Drury, 2012) suggests the Social Identity Model of Collective Resilience (SIMCR) whereby circumstances (sense of common) can create an emergent shared identity which can operate as a base for psychosocial support among refugees, and hence a possible source of efficacy.

Interviews with survivors of the 2005 London bombings showed that an emergent shared identity between the people affected, was the base on which strangers provided support, even when danger was perceived (Drury, Cocking, & Reicher, 2009a). The London bombings study informed a field guide that takes this capacity for informal collective resilience into consideration in emergency humanitarian planning (NATO, 2008). This document is intended for "Major Incidents, Conflict, Disasters and Terrorism", which implies similarity between these different settings. Based on the similarities to the disaster context, we hypothesise that a similar process of support based on an emergent "refugee" shared identity may be functional among refugees of conflict. Refugees of conflict – similar to people affected by disasters – suffer from major events that create mass injuries and collateral loss of possessions, and where the survivors try to cope with secondary stressors in a protracted aftermath. Similarities and differences between the two settings will be further discussed in research strategy section.

One recent study by Drury and his colleagues (2016) examined the SIMCR quantitatively among a large population (n = 1240) affected by the 2010 Chile earthquake, while testing an alternative hypothesis regard the source of providing social support (i.e., observing others providing support). The study involved a survey including scales that measured disaster exposure, common fate, social identification with affected others, expected support, collective efficacy and finally both observing and providing social support (emotional and coordinated social support). Structural equational modelling was used to analyse the data, which provided more details about the process of social identity-based model of collective resilience. The analysis showed that providing emotional and coordinated support was predicted by shared identity, which in turn was highly correlated with a sense of common fate due to exposure to the disaster. Observing supportive behaviour also predicted providing emotional and coordinated support, but more among those with high shared identity with those affected by the disaster. The last important result confirms shared social identity predicted a sense of collective efficacy, mediated by expected support (Drury, Brown, González, & Miranda, 2016). These rigorous and important findings, with a representative sample, support the SIMCR and shed more light on the details of the social identity-based support and its outcomes (efficacy) that are highly related to the topic of mutual social support among communities of war refugees, which might have similar processes of social support.

Identity Transition. Identity transitions are important to understand the impact of stressful events on well-being, that can be attributed to discontinuity with one's social connections, like moving away and losing group memberships. The Social Identity Model of Identity Change (SIMIC) assumes that people can deal with stress caused by losing old identities by replacing them with new identities, which not only substitute the old grounding

and sense of belonging with new ones, but also provide a base to receive and give social support (Jetten & Pachana, 2012). Some examples of the harmful effects of identity transitions on well-being can be found among international students whose well-being was found to be harmed as a result of a lost valued social identity (Praharso, Tear, & Cruwys, 2017) or as a result of internalising a stigmatic identity as in the case of homeless people (Walter, Jetten, Parsell, & Dingle, 2015). Refugees are a clear case of social identity transition as they acquire a new problematic label of being a "refugee" upon crossing the borders, although not all of them identify with it. Social identity can therefore be the basis not only for giving support in groups, but also to having many positive outcomes on well-being in times of transition.

The Social Cure. In addition to facilitating support among populations affected by mass emergencies and disasters, social identity has been found to have a positive effect on health. The concept of 'social cure' refers to "the ways in which a person's social relationships, social networks, social support and other social identity-based resources feed into health outcomes" (Haslam, McMahon, Cruwys, Haslam, Jetten, Steffens, 2018, p. 14). One setting where the social cure has been found to be manifested is in mass gatherings, where identification with the group can bring psychological and physical benefits (Hopkins & Reicher, 2017). In the religious gathering Magh Mela, that includes millions of pilgrims gathering for a month in conditions that are challenging to health, studies showed that participating in the gathering had positive effects on both physical and psychological health (Tewari, Khan, Hopkins, Srinivasan, & Reicher, 2012; Pandey, Stevenson, Shankar, Hopkins, & Reicher, 2014). Other studies showed that social identity can lead to health benefits

like coping with stressful situations (e.g., Iyer, Jetten, Tsivrikos, Postmes, & Haslam, 2009), engaging in health behaviours (e.g., Levine, Prosser, Evans, & Reicher, 2005) and affecting clinical outcomes (e.g., (Bizumic, Reynolds, Turner, Bromhead, & Subasic, 2009).

The way through which social cure leads to positive effect on well-being is traditionally explained by that identity-based (expected) support reduces stress and its negative impact on well-being (e.g., Haslam & Reicher, 2006), as in the integrated social identity model of stress (Haslam, O'Brien, Jetten, Vormedal, & Penna, 2005). In addition, there are other known outcomes of shared social identity like providing purpose, meaning and validation (Neville & Reicher, 2011), that could also contribute to the social cure effects.

1.1.4. Trauma of war

In addition to the deficiency in providing enough support to refugees, it seems that international NGOs are focusing their effort on specific areas of refugees' needs, which are arguably different from the areas more important to refugees and effecting more of them. The negative effect of armed conflicts and forced displacement situations on mental health is well established (Harding & Libal, 2012). The conflict in Syria is not an exception as recent studies found a relatively high prevalence of post-traumatic stress disorder (PTSD) among Syrian refugees in neighbouring countries (Ghumman, McCord, & Chang, 2016). However, when the World Health Organisation and International Medical Corps (2013) undertook an assessment of the mental health and psychosocial needs of Syrian refugees (N = 7964) in different regions of Jordan, they found that the most common mental health concern reported by the refugees was "Worry and concern over the situation, relatives and the future", followed by "Fear from environmental threats"; and when asked about the help they needed,

the top priority was "To improve services and living conditions", while only 13% expressed a need for "Counselling or psychological support" (p.27).

However, there is an extensive focus in research and interventions on war trauma and PTSD on the expense of other elements effecting the mental well-being of the refugees, which some argue is excessive in that it is out of proportion to need (Wessells, 2009). The excessive focus on trauma approach is problematic in two ways: first, by diverting attention away from other important factors affecting mental health of refugees that need more resources, interventions and research; second, due to shortcomings of trauma approach among refugees of conflict in developing countries, as following:

PTSD is a major trauma-related health concern in this setting. This concept is well situated in western individual culture; and its interventions were developed for individuals with a culture and conditions different from people in developing countries (Wessells, 2009) (e.g., different coping mechanisms), this cultural mismatch also could lead the researcher or the practitioner to cause unintended harm to the people they are trying to help due to their lack of understanding of local culture (e.g., the social stigma attached to rape or seeking psychotherapy; Almakhamreh & Hundt, 2012). Another major critic to the trauma approach is that it tends to pathologise communities based on a natural response (distress) to extraordinary situations, while such normal responses could be useful and healthy (Pupavac, 2002). There are also political uses of the extreme suffering narrative nature of traumatic experiences; it makes it more attractive to be used by media to identify victims and by politicians to justify actions (Breslau, 2004).

Finally, the criticism most relevant to our research scope is that the trauma-based approach does not take into consideration the complex nature of trauma-related mental health problems that is also affected by other factors, like the exile environment. Basheti, Qunaibi, and Malas (2015) found an association between psychological distress and living conditions;

refugees in tents had double the rates of refugees in caravans. As Miller and Rasmussen (2010) argue, "daily stressors" have a direct effect on mental health among refugees of conflict, in addition to increasing the negative effect of trauma on mental health. This conclusion is also supported by later studies (e.g., Im, Ferguson, Warsame, & Isse, 2017; Jayawickreme et al., 2017; Schafer, Masoud, & Sammour, 2014).

Recent research among refugees of armed conflict showed that war-trauma is not the most prevalent threat to mental health of the refugees, and the effect of such experiences is mediated by environmental variables. Al-Smadi et al.'s study (2016) shows that only one in five Syrian refugees in Jordan had high scores for PTSD, and that the higher scores are associated with factors not directly related to war (i.e., lack of jobs and medication). This is not just the case of Syrian refugees, as a previous review among other populations found that exposure to war and collective violence does create distress among the majority of affected children but only a minority of them develop mental disorders, and social factors are found to have an effect on such development (Drury & Williams, 2012).

1.1.5. Stressors of Exile

The literature discussing the well-being of refugees of conflict distinguishes between the traumatic stressors that arise directly from war (e.g., torture, injury or death of relatives) and the stressors that arise from the exile environment (e.g., documentation issues and crowded housing), although they have different names to describe the later. Some studies refer to the group of stressors that arise from the exile environment as "daily stressors" (e.g., Miller, Omidian, Rasmussen, Yaqubi, & Daudzai, 2008; Schafer, Masoud, & Sammour, 2014) that define it as "stressful social conditions", while other studies use the term "daily environmental stressors" (e.g., Riley, Varner, Ventevogel, Taimur Hasan, & Welton-Mitchell, 2017) and "ongoing stressors" (e.g., Tay et al., 2015) without providing a definition. A problem with the most common term "daily stressors" is that some of the stressors discussed by researchers do not happen daily (e.g., physical attack). Another area where the term "daily stressors" is problematic is when it is used in contrast to traumatic stressors, and although in that context it refers to war-trauma, it could lead to confusion were "daily stressors" are low intensity stressors, where in reality the stressors arising in exile does include high intensity traumatic stressors (e.g., domestic violence and sexual assault). Therefore, we suggest using the term secondary stressors used in the natural disasters literature to refer to "continuing or chronic problems that ... are not related to or inherent in the event [war]" (Lock et al., 2012, p. 3). That is they are only indirectly related; we would like to emphasise the socially-mediated nature of these stressors as they are shaped by the societal response to the war and displacement.

The literature on refugees of conflicts in developing countries provides us with examples of such stressors: among refugees in Afghanistan, these include overcrowded housing, poverty, unemployment, the security situation, violence in the home, poor health and pollution (Panter-Brick, Eggerman, Mojadidi, & McDade, 2008); El-Shaarawi (2012) reports inaccessibility to (work, education, and health) services, social isolation and separation from family and friends, decline in living standards, in addition to a status of uncertainty about the future among Iraqi refugees in Egypt. Even using unfamiliar transportation was found to be stressful, as in the case of Darfur refugees in Sudan (Badri, den Borne & Crutzen, 2013).

1.1.6. Possible Alternative Theoretical Frameworks

The psychosocial situation of the refugees of conflict can lend itself to many lenses, either based on wrong assumptions (e.g., inevitable selfishness) (Drury, Cocking, & Reicher, 2009b) or focusing on a single factor (e.g., war trauma). This project focuses on the collective resilience of the refugees of conflict communities facing a wide range of secondary stressors

in the developing hosting countries. However, even this lens can be approached using a different framework to what we suggest (i.e., shared social identity).

One important framework that could be used to explain and study community resilience is social capital, which is defined as "features of social organization such as networks, social norms and trust that facilitate coordination and cooperation for mutual benefit" (Putnam, 1995, p. 2), which seems to describe a similar process to the social identity approach, by the emphasis on the role of trust in facilitating the mutual support. Social capital is also shown to explain cooperative behaviour and community-based response in disasters (Wachtendorf & Kendra, 2004).

However, social capital is more concerned with existing social networks rather than the role of emerging social relations and networks, which can be better explained by proposed approach (shared social identity; cf. Jiang & Carroll, 2009). Thus both bonding social capital (within group) and bridging social capital (between groups) seems to represent a different approach than social identity, by focusing on established group memberships and by assuming that group activities creates the social bonds (Putnam, 1995); by contrast, the social identity approach assumes that such activities are determined by membership (i.e., identification). Another key difference is that the social capital approach seems to treat networks as based on interpersonal relations, whereas for the social identity approach these are based on social categories. In addition to neglecting the process of new in-group social relation formation, there is some evidence that the social capital approach might not be a good fit to explain collective resilience among minorities like refugees, especially with their well-being in mind; as identification with a minority group – who face racism – is found to be associated with lower social capital and better well-being (Heim, Hunter, & Jones, 2011).

There is a literature that shows how the two approaches seems to be compatible, whereby shared social identity processes appear to contribute in social capital (i.e., trust), as in the case of literature showing how identification with categories contributes to organisational social capital by developing an organic organizational identity that leads to an improvement in goal achievement, satisfaction and commitment (Haslam, Eggins, & Reynolds, 2003).

1.1.7. Research Objectives

This research project aims to explore the role of shared identity in social support among refugees of conflict by focusing on the situation of Syrian refugees in the Middle East while trying to answer the following main questions; what are the challenges that the refugees struggle with in exile? What kind of social support do the refugees offer to each other? To what extent do the refugees identify with the other refugees as members of one group? What is the role of this shared identity in the support process? And finally, would identifying with other refugees and engaging in support activities be related to well-being?

1.2. Research Strategy

1.2.1. Finding the Way

It is true that this project was inspired by established literature on shared identitybased support in disasters and valuable guidance was found in the literature about the social support experiences among refugees of conflict in developing countries; however, from the beginning, we were aware of the differences between the two contexts. Some of these differences are related to the nature of the challenges that interrupted the lives of the affected people, where disasters usually are sudden while armed conflicts are prolonged and involve intra-group tensions. Another difference is that armed conflicts have additional social tensions that could interfere with providing social support, such as pre-existing identities that might intersect with the fighting groups or the dynamics between the refugees and the locals in exile. This makes us realise that we are in front of two distinctive literatures which are relevant but with two gaps that I aim to address with my research project; first a context gap, addressed by extending the social identity-based support literature beyond disasters and mass emergencies, into the context of refugees of conflict; second, an epistemological gap where the literature looked at the possible role of shared identity, but did not examine the process nor used psychological methods and measures. This was addressed by introducing a fresh theoretical framework to understand the dynamics of social support within the refugees' community, along with appropriate methods to examine the process of shared identity-based support.

In order to investigate a process of support that we only have a prima facie evidence on in an environment highly sensitive to political, geographical, and cultural elements, like exile, we decided to adopt a careful approach that would study the topic in stages in order to avoid testing hypotheses based on unexamined assumptions (i.e., testing the process of shared identity-based support without empirical evidence on the existence of a shared identity-based

support among the refugees). Therefore, with the ultimate goal of shedding light on the process of shared identity support with a quantitative investigation, we decided to start with a compatible qualitative investigation, which allows an openness to unexpected parts of the experiences or unknown to the existing literature (Breakwell, Smith, & Wright, 2012)

Considering that all research methods have limitations, the best way to study a topic is through multiple studies with methods that does not share the same weaknesses (McGrath, 1981).

1.2.2. Qualitative investigation

To explore the dynamics of support and shared social identity among the refugees, I decided that to use ethnography as the study of people in natural settings, participate in their day-to-day activities, collecting data in a flexible way in an attempt to understand and explain the experience from inside (not imposed; Brewer, 2000). I planned to carry the ethnography among a community of Syrian refugees in Jordan as they are an excellent case to examine the emergent shared identity of being a "refugee" since the Syrian crisis is relevantly recent (compared to Palestinians), but it's not a temporary situation and has been going on long enough to allow the development and adopting of the new identity. There were a few possible locations in the Middle East to conduct the ethnography with Syrian refugees, but Jordan was the best choice as it is safer (less armed clashes) than other countries, such as Lebanon. Furthermore, Jordan is an Arab state and there are no language or visa barriers for me as a Saudi citizen to enter and move easily in the country, which is not the case in Turkey.

During the ethnography I embedded myself in the community I was trying to study, which provided the time and enough contact to build a trust-based relation with refugee community and locals, and allow first-hand observation of their environment and interactions. The aim of the ethnography was to collect data in the form of participant observations and interviews with refugees and relief workers in addition to casual

observations and chats in the area. The approach of data collection was exploratory/grounded in a sense that it aims to minimise the assumptions and adopt a naive approach that allows me to learn about the refugees' experiences, without being restricted by pre-conceptions (e.g., have a flexible interview schedule that allows adding or omitting questions). However, the data analysis was more structured in two ways; first it was guided by two main themes (secondary stressors and shared identity-based support) in a sense we were guided by the literature; second, the method of data analysis had a main goal of identifying common aspects of the refugees' experiences, rather than focusing on the personal experience of what it meant to be a refugee. This structured approach of analysis was planned to serve the mixed-method design of the research project by providing a better understanding of the factors that will be tested in the quantitative investigation and refine the measurement tools to fit the refugees' context. The ethnography also meant to serve a logistical purpose of facilitating later quantitative data collection by using the networks established with the local community and relief organisations.

1.2.3. Quantitative Investigation

The main goal of the quantitative investigation is to understand the role of the "refugee" shared identity in the process of social support, and then to see if such support could have an impact on refugees' well-being. This part of the research draws mainly from the literature of social identity's role in psychosocial support in disasters and mass emergencies. I adopted the theoretical framework and the measures of the concepts involved (i.e., common fate, identification, expected support, provided support and collective efficacy), and followed the same method of collecting data in the form of a survey. However, the quantitative research was not a mere replication of previous studies in the relevant literature, not only because it tested the hypotheses in a different context, but also due to the fact that we extended the theoretical framework to include the concept of secondary stressors

and measures of well-being. Due to the exploratory nature of the research project, this stage of research was not intended to reach conclusive evidence rather than finding suggestive evidence regarding the role of shared identity in social support among refugees of conflict in developing countries. Thus, the decision of using a convenient sample was acceptable.

1.2.4. On the Way (executing and improving the research strategy)

As the research project was initiated, the research strategy was revised and modified based on arising research opportunities and needs, while staying within the guiding questions and main research approach. As I was preparing to launch the ethnography, I had a collaboration proposal by a Turkish researcher to gain access to Syrian refugee population in south Turkey, by the borders with Syria. This was an opportunity to test both the newly developed measures (and the translation) and to test the existence of the shared identity-based support process among the refugees. Although full analysis of the data had to wait until the final stages of the research project, this study served our research in two important ways; first, it provided initial evidence of shared identity-based support among the Syrian refugees; second, to test and improve our quantitative design, which led to adding a common fate measure, full well-being scale (instead of a shorter version), and most importantly I realised the need for building a secondary stressors scale. I decided to build a scale for the context of refugees of conflict in the Middle East region that measures the exposure to the secondary stressors, rather than intensity of stress caused by the stressors (e.g., Afghan Daily Stressors Scale). This decision required that I carry out an additional survey among Syrian refugees in Jordan (Paper 3) before I could test the process of shared identity-based support in relation to well-being and secondary stressors (Paper 4).

1.3. The Stage

"We lost our home, which means the familiarity of daily life. We lost our occupation, which means the confidence that we are of some use in this world. We lost our language, which means the naturalness of reactions, the simplicity of gestures, the unaffected expression of feelings." Hannah Arendt (, 1943, p.110)

In this section I will try to give more context to help understand the papers following this chapter and most importantly, give a glimpse of the life of the Syrian refugees' community that I observed during this project. A context that starts with general descriptions of the exile environment (headings 1-4), followed by description and reflections of how I embedded myself within the community and how that transformed my understanding of it (headings 5-8).

1.3.1. Lost Sense of Normal Life

One major aspect of a refugee's life is the loss of a sense of a normal life no matter how many years they spend in exile. The sounds of the airplanes, bombing and firearms are far away from the hearing of the refugees, but that does not make their life "normal" as they have lost their homes, schools and jobs to be scattered in cities and towns that deny to accept them and insist on treating them differently. Syrian families in exile are constantly moving in search of cheaper rent and adopting a nocturnal lifestyle because parents are unemployed and the children go to afternoon schools. Whenever I talked to a Syrian refugee, I would feel a deep sense of instability. A Syrian refugee once told me that "*the biggest struggle for a refugee is the temporary situation. Where are we going? then what? The instability!*"

1.3.2. Ghost from the Past

With a relatively small population of around 6 million, Jordan experienced multiple waves of millions of refugees from neighbouring countries like Palestine, Iraq and now Syria. The Palestinian wave, in particular, left a deep impression on the Jordanian collective memory when it happened (1948) near the establishment of the Israeli state (1946) and it led to the integration of many Palestinian refugees who now constitute a large percent of the Jordanian citizens. An additional source of tension is the clashes that happened between the Palestinians who are still refugees and the Jordanian government in the past (1970) and the present, were it still cast shadows of tension with the marginalised Palestinian "camps" (ghettos) in Jordan. One example comes from AlBaga'a camp which in June 2016 witnessed a killing of 5 Jordanian officers (Beaumont, 2016). The long standing Palestinian refugee dilemma is a constant reminder for both the Jordanians and the Syrians of a destiny they prefer not to repeat. This fear feeds into the strong Jordanian resistance to any integration efforts, and thus the deep feeling of instability among Syrian refugees in Jordan. Irbid city has a Palestinian refugee camp (Figure 1.2) which was established in 1976 in the city outskirts and now has been engulfed by the city of Irbid and its tents were turned into concrete buildings. However, the skeleton of the camp still can be seen through the narrow and crooked streets. The area is still marginalised, stigmatised and distinctively isolated from the rest of the city.

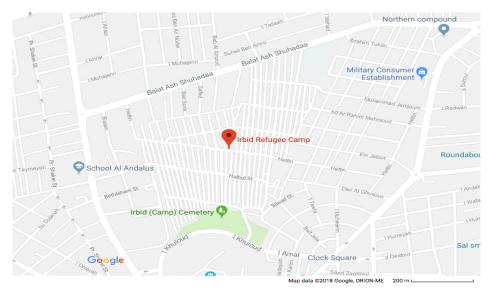


Figure 1.2: A map of Irbid camp for Palestinian refugees

1.3.3. Between Two Lives

Most of the Syrian refugees in Jordan are from the southern region of Syria, Dara'a, which is mostly rural. In addition to the proximity factor that facilitated the fleeing of the refugees to this city (25km between Irbid and Dara'a), the two areas share a lot. The two areas share a common traditional culture which is a mix of rural and Bedouin traditions, as both areas historically used to be in one region, "Horaan", before it got divided by the relatively recent country borders.

However, crossing the borders was a crossing to a different life, for many of the refugees used to live in self-owned homes and worked either in their farms, small businesses or as public servants. Due to the nature of the Syrian economy (socialist), they did not have to worry about paying the cheap utility bills or about the college education, which was free. In contrast, they faced relatively expensive living costs in Jordan, which 2010 – before the war – ranked 149 on the Consumer price index while Syria ranked 173 (United Nations, 2018). Jordanian citizens themselves complain about the cost of living, although many of them have advantages over refugees, like permission to work and owning a home.

Returning home is not an option for the majority of Syrian refugees, especially with some of them that lived under the military action until their own homes were burned to the ground. Refugees reported that facing the threat of returning back to Syria could lead to major risks over their lives, as some of them are wanted by the government to serve in the army or for execution.

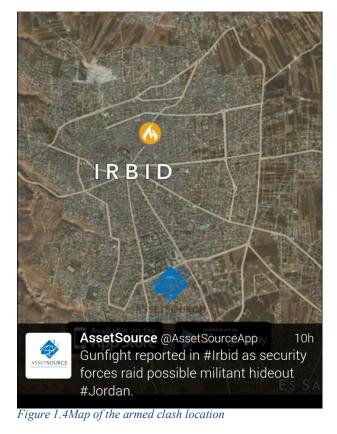
1.3.4. The Fear

The exile environment in Jordan is not only unfamiliar and expensive to refugees, but also fearful. As mentioned earlier, Jordan is very clear in their resistant to refugees' integration, while the fact that it's not part of the 1951 convention (UNHCR, 2011) makes it easier to enforce restrictions of refugees and even deport them without being held accountable. In the Middle East, police and security forces are both powerful and intimidating, not only to refugees, but to citizens and legal visitors like myself. Daily social disputes are up to people to resolve among themselves while law enforcement is saved for the serious crimes and big conflicts, and even then, your social connections can swing things to your advantage.

Refugees try to avoid encounters with police even if they entered the country legally and committed no crime (e.g., an eleven-year-old student was walking with me on the way back from a field trip when he asked if we could avoid passing by police officers, although I knew he was registered with the UNHCR). Refugees know that security forces can arrest them and deport them anytime for breaking any of the many restrictions or without giving any reason, like what happened to a young man who was called for a "chat" with an officer then was arrested and scheduled to be deported without trail. You could face a range of punishments from a slap on the wrist, few days in prison, thrown into refugee camp or deported back to Syria. This could be for reasons like having expired documents or working without a valid permit or talking back to an officer on a roadblock. Sometimes you don't have to do anything to be deported, like what happened to a student whose whole family was taken from home by police cars and never heard from again. A few days later he told me that his brother was "killed in action" in Syria.

Local authorities justify some of these measures as necessary in a war-affected zone, where intelligence activities and militant infiltration is expected and does happen. For example, on March 2016 an armed clash happened near downtown Irbid (Figure 1.4) between the Jordanian security forces and twenty alleged ISIS members that led to deaths on both sides (BBC, 2016). However, this legal environment and political atmosphere creates a deep sense of insecurity and suspicion (Figure 1.3), although the refugees themselves would say that they feel safe in Jordan, but they would be referring to being safe from crime.





1.3.5. Testing the waters

Five months prior to the ethnography, I did a pilot visit to Jordan to prepare for the ethnography by conducting some interviews with Syrian refugees and to assess the feasibility and the risk in the planned project. Furthermore, the main goal was to get a legitimate sponsor to protect me from being deported before finishing my data collection. During this trip, I secured a volunteer position in the local branch of an international NGO to gain access to Syrian refugees, in addition to acquiring a status of visiting student at a refugee studies research centre in a local university. This gave me access to local academic experts in the research topic and importantly, gave me a legitimate purpose to be in Jordan, where the local authority don't favour strangers wandering around asking Syrian refugees questions about their challenges and how they are treated by Jordanians. I met with local relief workers and academics who had worked with Syrian refugees for years, in addition to conducting five pilot interviews. During the interviews with the Syrian refugees, I had the chance to test the interview schedule but I found most of the participants were reluctant and suspicious, which led to sanitised short answers where they avoided giving negative feedback about locals or the conditions of exile.



Figure 1.5: Location of the ethnography

1.3.6. The neighbourhood

The international relief organisation suggested that I join their branch in the city of Irbid near the borders with Syria (Figure 1.5, 1.7), where large numbers of Syrian refugees settled. After getting familiar with the city of Irbid, I decided to work with a student organisation that had a school in the middle of a neighbourhood densely populated by Syrian refugees.

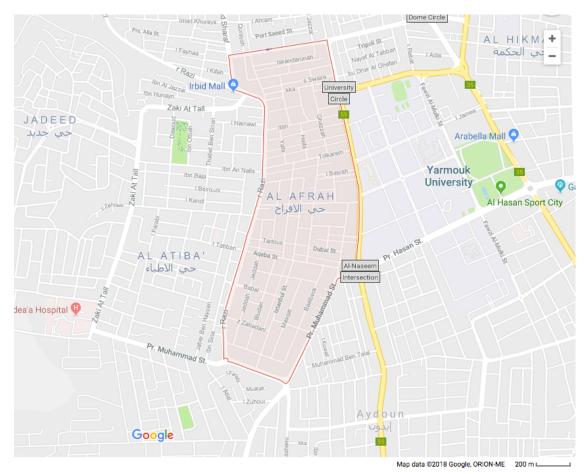


Figure 1.6: The Syrian refugees' neighbourhood (Ethnography location)

The neighbourhood (Figure 1.6) was separated from a campus of a government university by a main commercial street, full of restaurants, cafes and a variety of shops. It was a few kilometres in diameter, located outside of the city centre, not well-maintained and populated mainly with Syrian refugees in addition to some Jordanians and international students. There is no formal address system in use, so usually when I describe the location to a taxi driver, he would say "you mean Dara'a", referring to the fact that the majority of the people in the neighbourhood are from the nearby Syrian city, Dara'a. The building standards in Jordan are not exceptional, but the neighbourhood seemed in worse condition than average due to the usual scenes of sewers overflowing between buildings and garbage containers on fire (Figure 1.10), and inside the building you'd find exposed electric cables (Figure 1.9) and staircases without railings or lighting. The neighbourhood was also located downhill from the main street and would get flooded when it rained (Figure 1.8).



Figure 1.7: Irbid city, near the refugees' neighbourhood



Figure 1.8: Street leading to neighbourhood





Figure 1.10: Burning garbage container

1.3.7. The School

The school (Figure 1.11) was a three-bedroom apartment rented by volunteer college students (international, locals and Syrians) that aimed to help the Syrian children to catch-up with their studies, in addition to extra-curricular activities (e.g., drama, music, photography and entrepreneurship). The Syrian children needed the extra help as many of them missed a few academic years due to war and displacement. Some children were sent to work or sell tissues and chewing gum in the street, while the lucky ones would go to Jordanian schools after regular hours and receive questionable-quality education.

I was in charge of the photography club (Figure 1.12) and was teaching two small groups of four and six children during my stay, in addition to administrative and labour work at the school (e.g., decorating and maintenance). Such a role allowed me regular interactions with the students' parents and neighbours of the school, in addition to making me part of the daily scene of the neighbourhood by walking to the school from my nearby rented room almost daily. After a few weeks of working at the school, some of the students started to call my name and talk to me whenever I passed by and I started to make friendships with Syrian families who invited me to their homes and shared their food and many stories.



Figure 1.11: The school for Syrian children

Figure 1.12: Photography club

1.3.8. Scratching the Surface

During the first night of my arrival in Irbid, I went out to a cafe on the main street near my hotel. While I was sitting at a table by the street, three children aged 6-7 years approached me begging for money. They caught me by surprise and without thinking, I gave one of them some coins. The other two started to ask for money too and from their accent I knew that they were Syrian. This encounter, made me understand how some outside visitors may get a negative impression about Syrian refugees, especially an image of Syrian street beggars. That night, I was not aware that just behind that street, there was a neighbourhood full of Syrian refugees whose behaviour would put such superficial impression to shame. There I met with many refugees who had dignity, kindness and altruism that exceeds what I find in many people I know who live a normal life. In many cases, I found it hard to convince a refugee to take aid that he desperately needed because it was perceived as charity. In one case, a refugee even refused to receive the UN food coupons that he needed. They might need a handout, but they only ask for a chance to provide for themselves, to have a "normal" life, if such a thing is possible in exile.

1.4. Overview of Papers

In this section I will give an overview of the four papers that were included in this research project. Paper 1 is a critical literature review of psychosocial support among refugees of conflict in developing countries. Paper 2 included the ethnographic investigation of social support and shared social identity among the refugees' community. Paper 3 included data from two studies, an ethnographic data about the secondary stressors among the refugees' community in addition to quantitative analysis of a survey data about secondary stressors among Syrian refugees in Jordan. Paper 4 include the quantitative analysis of two surveys among Syrian refugees in Jordan and Turkey, to examine the process of shared social identity-based support in relation to the refugees' well-being and secondary stressors.

1.4.1. Paper 1: Critical Literature Review.

At the beginning of this research project, I carried out a literature review to understand the context of psychosocial support among refugees of conflict in developing countries and the challenges that they are facing. Additionally, I worked on looking for any relevant literature that discussed the role of social identity in facilitating social support among refugees of conflict. The systematic literature review (N = 60 articles) from different disciplines (e.g., anthropology, psychology, sociology, psychotherapy, public health, politics) discussed psychosocial support among refugees of conflict in developing countries. The review revealed how daily stressors are a major issue of struggle among refugees (e.g., El-Shaarawi, 2012; Panter-Brick, Eggerman, Mojadidi, & McDade, 2008; Wessells, 2009) and have direct and indirect effect on their mental health (Miller & Rasmussen, 2010), while the current response to refugee crises includes an excessive focus on trauma and PTSD. The literature also included some examples of social support among the refugees that appears to be based on social identity, that comes sometimes through pre-existing forms (e.g. tribal networks) (Chatty, Mansour, & Yassin, 2013), while sometimes appears to be based on a shared identity due to common fate (Moulin, 2010).

1.4.2. Paper 2: Social Identity Ethnography

This paper discusses an eight-month ethnography that I conducted among a Syrian refugees' community in Jordan, with the aim of exploring social identity-based support available in the refugees' community in response to challenges they face in exile, and possible sources for such support. After establishing trust-based relations among the refugees' community, I conducted in-depth interviews – over a long period of time – with 13 refugees and two relief workers in addition to casual talks and observations about the living conditions and social relations of the refugees and local community. Thematic analysis was used to analyse the interview data, and the observations were used to either give examples or to support a claim based on an extract.

The analysis showed that the refugees' community did have many forms of support (material, emotional, informational & efforts) among the refugees, and these kinds of support can be personal (e.g., sharing furniture or information) and collective support (e.g., teaching after school classes or aid distribution). Some refugees were not engaged in providing or receiving help with other refugees due to a feeling of distress and lack of resources, but I also found that most of the participants were providing support to other refugees, although the motives were different as some refugees would help only relatives while others help refugees in general. The analysis focused on the participants who participated in collective social support that serve the general community of refugees and found that some of them were motivated by their personal values (i.e., humanity and religion), while most of them stated that they offered support out of sense of belonging to the Syrian refugees due to common struggle that they share.

In a further investigation we investigated if this shared identity facilitating social support is an emergent or a pre-existing identity. Two indications supported the emergent shared social identity hypothesis; first, the radical change in the structure of social relations among most of the refugees, where their relations shifted from the traditional (tribal and hometown-based) to more diverse (people from other regions and social economical classes), where it become usual to see farmers, military people, politicians and doctors from different regions of Syria in casual social meetings. Such new social connections that reported to be based on common fate seem to provide a fertile soil for collective initiatives among the refugees' community (e.g., teaching after school classes, legal assistance to deal with authorities and starting aid funds to support fragile families). Second indication that supported the emergent shared identity is that some refugees reported that they identify with other refugees even if they were not Syrian (e.g., Palestinian, Iraqi refugees and refugees from Burma).

1.4.3. Paper 3: Secondary Stressors Typology

This paper aimed to identify the stressors arising from the exile environment and start building an initial typology of secondary stressors among Syrian refugees in Jordan that might be a model for a more comprehensive account of secondary stressors among refugees of conflict in developing countries. With a goal of building a scale of secondary stressors I first used qualitative data from interviews with Syrian refugees (and two local relief workers) in Jordan (N = 15) to create a list of secondary stressors, and then conducted a survey (N =305) among a convenient sample of Syrian refugees in Jordan recruited on Facebook, which the Syrian refugees use actively. The survey qualitative thematic analysis of the interviews produced three main types of stressors (financial, social and environmental), while the quantitative factor analysis found four groups of stressors (financial, environmental, safety and relation with locals), which considered as a good relative match as the four categories scale is situated within the three main themes (items of safety and relation with locals falls in the social relations category). Six out of the top common stressors in the survey were financial, followed by stressors regarding the environment (constant moving, house maintenance, pollution and lack of recreation), while exploitation and harassment from locals were reported to be uncommon.

1.4.4. Paper 4: Support Process Model

In this paper, I try to test the conclusions reached through the ethnography about the role of shared social identity among the Syrian refugees and adding more quantitative details about the process of such support and the relation between relevant variables (adapted from the literature), which includes the secondary stressors scale developed in paper 3. This was achieved through two surveys conducted among convenient samples of Syrian refugees in Turkey (N = 234) using a paper questionnaire, and Jordan (N = 156) using a snow-ball sample on Facebook that included measuring identification with other refugees, expected support, provided practical support, coordinated support, collective efficacy, common fate, in

addition to general health and secondary stressors. We found evidence that sharing a sense of common fate was strongly associated with identifying with other refugees, which shows to be a strong predictor of higher sense of collective efficacy in addition to predicting providing both practical and coordinated support. Collective efficacy and coordinated support was found to have a positive association with general health, in addition to the expected negative association of stress and stressors with general health of refugees. Finally, time spent in exile was found to moderate the relation between exposure to secondary stressors and the sense of common fate, which indicates that shared identity (stems from common fate) is emergent rather than pre-existing.

2. Paper 1: Psychosocial support among refugees of conflict in developing countries: A critical literature review

Alfadhli, K., & Drury, J. (2016). Psychosocial support among refugees of conflict in developing countries: A critical literature review. *Intervention*, *14*(2), 128-141. doi.org/10.1097/WTF.00000000000119

2.1. Abstract

The aim of this paper is to examine the psychosocial needs and stressors among refugees of conflicts in developing countries, and their group-based social support mechanisms. A systematic literature search of peer reviewed journal articles (n = 60 articles) was carried out using the following factors: type (refugee); cause (conflicts); location (developing countries). As refugees move towards a prolonged urban displacement phase, needs and stressors become different than those of the acute phase. Daily stressors affect far more people than are affected by PTSD, but many psychosocial support interventions focus simply on the latter. Positive effects of social support on the mental health of displaced people are established; the process is not clear, yet group processes and identities seem to be important. We therefore suggest that the social identity approach can be applied to understand the emergence of a common refugee identity and its role in empowerment through activating social support networks.

2.2. Introduction

The aim of this paper is to examine the psychosocial needs and stressors among refugees of conflicts in developing countries, and their group-based social support mechanisms, with a view to developing a social psychological analysis of the process. We carried out a systematic review of the literature on refugees' stressors and coping and identified two dominant approaches to understanding and intervention: the trauma focused approach and the psychosocial support approach. Refugees face a wide range of different everyday stressors quite different from the primary stressors and threats that forced them to take refugee status. However, the literature also points to some important coping mechanisms which are based on group processes and identity, which have been somewhat neglected in humanitarian initiatives.

The paper starts with an overview of the dimensions of the forced displacement situation and response efforts, including the recent history of humanitarian guidelines in relation to psychosocial needs, and will then explain the methodology of the systematic review. The findings of the review suggest very strongly the vital role played by identity and group processes in mutual psychosocial support among refugees. We therefore argue the need for future research on psychosocial support among refugees to draw upon ideas from the social identity approach in social psychology.

2.2.1. Global overview of forced displaced people

The UNHCR global trends report for the year 2014 shows that around 60 million people are forcibly displaced, 86% of which are in developing countries (UNHCR, 2015a). The global distribution of refugees is highly unstable where numbers and ranks change fast (Quosh, Eloul, & Ajlani, 2013). The main reason for fleeing is threat to personal safety in addition to other reasons, as data from 129 countries between 1946-1989 showed that conditions in the destination also affect the decision to flee one's home, where refugees were found to prefer the country with more democracy (Davenport, Moore, & Poe, 2003). Adhikari

(2012) using official records, found other factors affecting the decision to flee, such as economic and physical conditions in addition to the presence of social networks.

2.2.2. Mental health and psychosocial needs in the humanitarian literature

The 1990s witnessed a rise of intense armed conflicts around the world (Themne'r & Wallensteen, 2012) which led to the emergence of new conflict-related specialities and research fields that attracted a large number of professionals (Agier, 2002). These conflicts posed huge challenges to international institutions, which responded with more coordination and collaborations and the production of guidelines and criteria for humanitarian work.

Thus the Sphere guidelines book (Humanitarian Charter and Minimum Standards in Humanitarian Response) was established in 1997 to provide standard criteria to the humanitarian field. It includes five main categories of criteria (protection, water and sanitation, food and nutrition, shelter and health) and gives a great deal of attention to the psychosocial needs of populations affected by disasters or conflicts (Sphere, 2011, p. 56).

A decade after the start of the Sphere project, a new project emerged dedicated to the psychosocial needs of affected populations in emergency settings. The Inter-Agency Standing Committee (IASC) guidelines (2007) defines *emergencies* as 'situations arising from armed conflicts and natural disasters - including food crises - in which large segments of populations are at acute risk of dying, immense suffering and/or losing their dignity.' (p. 17), and defines mental health and psychosocial support as 'any type of local or outside support that aims to protect or promote psychosocial well-being and/or prevent or treat mental disorder' (IASC, 2007, p. 1).

These previous humanitarian guides emphasise the need to 'promote self-help, coping and resilience among affected people' (Sphere, 2011, p. 17), and suggest that 'in most emergency situations, significant numbers of people exhibit sufficient resilience to participate in relief and reconstruction efforts' (IASC, 2007, p. 10). However, these guides were not

focused on the setting of prolonged forced displacement due to armed conflict, which is the concern of this review.

2.3. Method

2.3.1. Data search

Six data-bases were used (Web of Science, Scopus, ASSIA, IBSS, PsychInfo and PsychArticles) with the following search strings: [postwar OR refugee* OR war OR disaster OR displace* OR conflict OR asylum) AND TS=(cope OR coping OR trauma* OR distress* OR stress* OR needs OR empower* OR support* OR psychosoc* OR social OR group OR resilience OR identity OR "well being" OR vulnerab* OR "collective action") AND TS=("refugee*") Refined by: *TOPIC:* (refugee*)]. The search was conducting within English language literature papers published between 1980 and 2014.

2.3.2. Inclusion and exclusion criteria

Due to the inter-disciplinary nature of the field of study (anthropology, psychology, sociology, psychotherapy, public administration, public health, epidemiology, politics and international law) the initial search yielded a considerable number of results that did not fall in the scope of this review. To filter that diverse literature, we used a number of criteria. The population of interest for this review are refugees of conflicts who are located in developing countries. So the filtration process excluded any works that solely discussed internally displaced people (IDPs), refugees of natural disasters or refugees in developed countries (e.g., from North America, Western Europe and Australia). However, the review included some literature that used mixed samples of refugees and IDPs. Developing countries were defined using the UN country classification under the "Developing economies" category (UN, 2015).

We acknowledge that internally displaced people share with refugees many conditions and problems. However, we chose to focus on refugees in this paper because refugees are a distinct group with specific problems of registration.

2.3.3. Screening and selection

The first stage of literature screening and selection search yielded 1280 results, of which 270 were identified as duplicates and removed. The second stage involved screening the titles and abstracts using the inclusion and exclusion criteria, which decreased the numbers of results to 299. The third stage of screening was done using full text in-depth examination using the inclusion and exclusion criteria, which decreased the number to 49 results. Due to the nature of this review which gives attention to international documents essential to understand the study topic, an additional 11 external results were added to the review pool in the final stage, from Google Scholar, credible international NGOs' reports and guidelines, and expert recommendations.

This review included a diverse literature from different areas and conflicts discussing typical situations for refugees of conflicts in developing countries. The assumption is that, as well as specific experiences, refugees of conflicts share a similar situation. Therefore, the stressors that have been described are assumed to be typical or reflect typical situations (there was nothing in these studies to highlight exceptional situations). On finishing gathering the sample, we then organized the literature according to five themes and a number of sub-themes, as shown in Table 2.1.

1- mental health and psychosocial support	2- needs of refugees of conflict	3- labels and categories	4- refugees' identity	5- critiques of mental
				health and
~~PP ~				psychosocial
				interventions
Effects of war on mental health	Different phase, different needs	Registration	Emergence of an Identity	Lack of evidence for interventions
Trauma focused approach	Role of daily stressors		Exile as alternative home	Concentration on needs
The psychosocial support approach			Negotiating identity and solidarity	Excessive targeting
			Coping and identity	Political agenda
			Role of religion	Western individual- focused approach

Table 2.1: Themes identified in literature

2.4. Mental health and psychosocial support

2.4.1. Effects of war on mental health

There is a considerable social cost to forced displacement that needs specialized professional services in the humanitarian field (Harding & Libal, 2012). Roberts and Browne's (2011) literature review showed a strong negative influence of forced migration on mental health, and found that mental health risk factors for populations affected by war in low/middle income countries are different from those who are in high income countries. A meta-analysis of 56 reports on mental health among forced-displaced people showed that socio-political conditions affect the mental health of refugees, and humanitarian intervention to address these effects does have a positive outcome (Porter & Haslam, 2005). These effects could explain why substance abuse was found to be common in some communities of refugees of conflict (Ezard, 2012).

There are two main approaches to the psychological wellbeing of populations affected by armed conflict settings. The clinical trauma-focused approach is based on clinical intervention and targets war-related traumatic experiences as sources of distress. On the other hand the psychosocial support approach attributes distress to the accumulation of life hassles that are not necessarily war-related, and advocates relief by reducing these stressors along with building capacity for self-recovery (Miller & Rasmussen, 2010).

2.4.2. Trauma focused approach

Refugees of conflict are exposed to a variety of traumatic experiences, which led many research and intervention programmes that target this population to focus on posttraumatic stress disorder (PTSD) as the main mental health concern (Jordans, Semrau, Thornicroft, & van Ommeren, 2012). Research also shows a relation between leaving one's country during war and serious long-term psychological problems (Hunt & Gakenyi, 2005). However, while PTSD treatment is well established in the general population, a review of ten PTSD treatment trials on refugees and asylum seekers could not find solid evidence to support such treatment (Crumlish & O'Rourke, 2010). Moreover, although there is a need for specialized PTSD services among refugees, such services are not always available (Bader et al., 2009).

A study of refugee populations in Jordan and Nepal suggests that the effect of traumatic past experiences on distress is complex; the research found a mediating effect of perceived daily stressors on the effect of exposure to war mental health (Miller & Rasmussen, 2010). These findings should bring more attention to the role of daily stressors on mental wellbeing of refugees of conflicts.

2.4.3. The psychosocial support approach

Psychosocial interventions come in many forms and scales, and the services provided through these interventions vary from basic relief services (shelter, food and health) that can

be provided by the average relief worker and target most of the affected population, to specialized clinical services that target specific cases (IASC, 2007, p. 12)

After the invasion of Iraq in 2003, UNHCR started a community outreach initiative in Syria whereby 180 Iraqi refugee volunteers participated in bridging the gap between the organization and the refugees' community through community networking, which provided support to around 6,000 refugees every month (Mirghani, 2013).

Psychosocial support interventions can extend beyond emergency stages as in an example from South Africa where in 2008 xenophobic violence forced refugees to leave their homes. The Lefika La Phodiso organisation offered counselling and debriefing for the refugees in camps; after the shutdown of the camps they worked on turning the community from being a threat to a source of support by training teachers on diversity and discrimination, in addition to organizing exhibitions of art works made by affected persons and showing encounters of violence (Atlas, 2009).

Another example comes from the Karen Burman refugees in Thailand who built an effective and sustainable community-based health care system that uses traditional practices to deal with physical and psychosocial problems among refugees (Bodeker & Neumann, 2012). Research on refugees of conflict also reveals the natural psychosocial support that exists among the affected population that has an impact on their mental health. For example, it was found that among Guatemalan refugees in south Mexico, women who lack or have weak support from natural social networks are the most vulnerable and show traumatic stress symptoms (Warner, 2007).

2.5. Needs of refugees of conflicts

2.5.1. Different phase, different needs

Although one might think displacement is an escape from insecurity and instability, refugees in underdeveloped areas often find themselves replacing old insecurity and instability with new forms of it (Moulin, 2010). As protracted displacement is becoming more

common, it constitutes more than half of the total number of people that fall under the concern of UNHCR (UNHCR, 2012).

Sphere was designed based on evidence from the acute phase of emergencies, whereas the majority of the refugees live in a post-emergency situation, which is characterized by different problems and needs than the emergency itself (McDougal & Beard, 2011). Examples of such problems can be found in the Afghan Daily Stressors Scale, which includes overcrowded housing, poverty, unemployment, the security situation, violence in the home, poor health and pollution (Panter-Brick, Eggerman, Mojadidi, & McDade, 2008). El-Shaarawi (2012) found that needs of Iraqi refugees in Egypt included: accessibility to work, education and health care, and their problems included social isolation and separation from family and friends, and decline in living standards. They also experience a status of uncertainty because they considered their residence in Egypt as temporary while waiting for returning home or resettlement, but found it extended for several years because both options proved inaccessible. Iraqi refugees reported suffering from mental health problems as a result of this status of instability. Sometimes refugees suffer stress due to the new environment as in the case of students from Darfur who reported that using the transportation system in Sudan and getting directions was challenging (Badri, den Borne, & Crutzen, 2013). They also reported that losing their family social relations made them feel lonely, while dealing with a new culture made them feel like strangers. In such situations, cultural competence approach interventions proved beneficial, like the nine-steps psychosocial programme applied to Sudanese refugees in Uganda and returnees in Cambodia (Eisenbruch, de Jong, & van de Put, 2004).

2.5.2. Role of daily stressors

Miller and Rasmussen (2010) make the case that, due to the dominance of traumafocussed approaches in the field, the research has narrowed the investigation of the impact of violence on mental health until recently when researchers added daily stressors to the

equation. These recent studies showed that the direct effect of exposure to violence was overestimated, and that PTSD prevalence can be reduced by attending to the daily stressors, which suggests a mediating effect of daily stressors on the relation between war related violence and mental health. However, the mediation model is not comprehensive, since daily stressors are found to have an effect on mental health independent from war-related violence (Miller & Rasmussen, 2010).

2.6. Labels and Categories

Due to increased globalization, the movement of forced displaced people is no longer limited to the south; governments of the north took over producing the labels for categories of refugees, instead of humanitarian non-governmental organisations working on the ground, as used to be the case (Zetter, 2007). The definition of 'refugee' developed to include new emerging situations after 1945. Some of these situations were unique enough to create a subdefinition and category like 'natural refugee' (Marshall, 2011). The problem of such categories that they assume a common vulnerability among the population and seek needsbased top down interventions that ignore the unique capacities and resilience of the affected groups; this stigmatizes the population by looking on them as helpless dependent victims (Gupte & Mehta, 2009). On the other hand, a deeper look would be beneficial for understanding issues like efforts to govern refugee camps and what makes the refugee community cooperate or resist in reaction to different approaches that seek control over refugees or empower them to be active agents (Bulley, 2014).

2.6.1. Registration

Refugees usually acquire documents at border points indicating that they are *asylum seekers*, but they do not qualify for the *refugee* status until they go through a bureaucratic process that could extend to several months (Alsalem & Riller, 2013). After acquiring the

official status of *refugee*, many refugees from developing countries apply for resettlement in developed countries (e.g., USA, Australia and Canada). The importance of having official refugee status could explain why preparing for UNHCR application was one of the top priorities for refugees as shown in a needs assessment done by a major organisation in Cairo, as undocumented refugees receive less help and face more serious problems (Briant & Kennedy, 2004). Jordan did not sign the 1951 UN refugee convention, which led to the registration of only 10% of the Iraqi refugee population in Jordan in 2009, estimated at around half a million (Almakhamreh & Hundt, 2012). Also, most of the Middle East countries hosting large numbers of refugees do not officially recognize them as refugees (Mowafi, 2011). In Thailand, there are 18,400 refugees in addition to more than two million other migrants, many of them meet the criteria to be granted official status of refugee, but don't get it for legal reasons (Bodeker & Neumann, 2012).

The bureaucratic tool of the international humanitarian system manages the refugees regardless of their histories, fears, hopes and desire for freedom. Franke (2009) suggests that such unjust conditions push refugees to manipulate the registration process in negotiation to improve their position, a process that sometimes involves the local authority who inflate the numbers of refugees in order to get more humanitarian aid for their region. While cheating in normal settings is considered selfish and against the common benefit, in the case of refugees it is a normal expected behaviour because failing to do it could lead to social sanctions. Cheating (e.g., multiple registrations and giving inaccurate information) can take the form of a collective action whereby the refugees make joint efforts to achieve a goal, creating negotiation leverage with non-government organisations that have far more resources (Kibreab, 2004). Such understanding of the power imbalance created by unequal resources should give us a rational understanding of refugees' behaviour (collective action), avoiding subjective interpretations that explain their behaviour (like manipulation) motives as simply selfish and anti-social.

Being registered as a refugee is not the answer to the refugees' problems; Bradley (2014) argues that focusing on refugees as if they were 'stateless' could lead to considering them as rightless, while instead we should consider them as citizens with rightful claims against their country. Kibreab (2003) suggests 'belonging' as an alternative approach to refugee situation, where they are giving the opportunity to re-establish a sustainable livelihood, instead of the approach that treats them as temporary guests which disempowers the refugees and prevents the host country from benefiting from their capacities.

2.7. Refugees' identity

2.7.1. Emergence of an identity

Moulin (2010) described the shared identity that can emerge from being refugees, using interviews with refugees in Brazil who were from different categories (undocumented vs asylum seekers) and different stages (new arrivals versus applying for permanentresidence). She found that they share the same situation of *refugeeness* (i.e., condition of being a refugee) and common perception of assistance they receive from the local authorities. Exclusive social activities in exile also plays a role in that process, like Sudanese alcohol *Aragi* consumption spaces which are forbidden for Egyptian locals; at the same time it includes a wide array of Sudanese and provides a symbolic element of building refugees' identity through an exclusive social interaction space of insiders' social networks (Curley, 2009). Another process that contributes to the construction of refugee identity is a narrative of personal history. This way the refugees go through a process of identity re-negotiation in order to connect their painful experiences with the present, and exceed their personal consciousness to become part of collective memory that shapes the *refugee* identity (Buyer, 2008).

2.7.2. Exile as alternative home

Most refugees leave their home as a temporary solution with the intention of returning after a short time, but in many cases they end up spending many years in exile. In these cases, exile becomes an alternative home that does not replace the original. This is shown clearly in the case of hundreds of thousands of refugees from Azerbaijan who spent twenty years in Armenia where the majority of them resisted the settling option (Felke, 2010). The division of Cyprus is also a good example where attachment of people to their old homes lasted over decades and affected their perception of their current homes as they still don't see themselves as the 'real owners' (Bogac, 2009).

Even in the case of refugee camps that are not meant to be permanent, refugees accumulate memories and relations of support which intertwine to create a sense of home. An extreme example of the temporary case where the host and the refugees both refuse to integrate, but nevertheless the *temporary* home had meaning comes from the work of Ramadan (2014) who studied Nahr al-Barid refugee camp in Lebanon that used to host 35,000 Palestinian refugees who lived in it for decades before it got destroyed by Lebanese government forces in 2007, in the aftermath of armed clashes with militant groups from the camp. To the Palestinians, the destruction of the camp meant a destruction of an alternative home and made them re-live the tragedy of losing the mother home Palestine. Nahr al-Barid refugee camp suffered from serious problems like poverty and restrictions of rights. However, interviews with former residents of the camp and felt their loss (Ramadan, 2014). Part of the function of refugee camps as an alternative home is to preserve identity; it was found that refugees settling individually in towns have a weak ethnic identity compared to their peers who are settled in refugee camps (Agier, 2002).

2.7.3. Negotiating identity and solidarity

Music and dance are used to express identity and solidarity but also involve a negotiation of competing and overlapping identities. Sudanese refugees who include minorities of Madi and Latuko who adopted the Acholi majority's language, which is the language of cultural activities in the camps, like the dances and songs (Kaiser, 2006). Songs and dance can also have a role in solidarity as in the case of fourth generation of Palestinian refugees who use traditional dancing (dabkah) to express identity and thus create a sense of belonging. This ritual music performance - usually played at weddings and which sometimes includes hundreds of dancers - helps address the social fragmentation caused by displacement (Van Aken, 2006). Palestinians in Lebanon still live in refugee camps which are considered sites of making the Palestinian identity for six decades. A Palestinian refugee expressed this by saying 'If people don't live in the camp, they'll forget Palestine. But inside, people talk about Palestine, returning to Palestine,' (Ramadan, 2014, p. 55). The camp gave the shattered Palestinian refugees the chance to some extent reunite by gathering on the base of village of origin in specific camp or a section of the camp that sometimes hold the name of original village (Ramadan, 2014). A good example of identity-based solidarity is found in Lebanon in the case of undocumented Bedouins who don't have access to the official citizen-based health care system; in this case, the tribal social networks offered health care support (cash money hand-outs, loans, payment for medical bills, transportation and calls for blood donation) that extend across the Syrian borders (Chatty, Mansour, & Yassin, 2013). Another example comes from Thailand where Vietnamese social networks offered the refugees agency in spite of the policy constraints (Palmgren, 2013).

2.7.4. Coping and identity

Displacement by definition includes a break from the familiar cultural context, which leads to reconstruction of displaced people's perception of their self, community and the world. Refugees have coping mechanisms to decrease the impact of displacement by making

their new environment as familiar as possible. One way of doing that is to use the physical environment to create continuity with refugees' past, which gives them a sense of home. Refugees actively and creatively make sense of their new physical world by production of objects like food and textiles associated with pre-exile life, in order to create feeling of *home* (Dudley, 2011). Karenni refugees in Thailand did this by building their homes and growing vegetables and cooking them in a traditional way (Dudley, 2011).

2.7.5. Role of religion

There is some literature (e.g., Fiddian-Qasmiyeh, 2011) that has examined the faithbased organizations working with forced displaced people in comparison to secular organization in the field. Faith-based organizations can play an important role in refugees' life, like in the case of Karen refugees in Thailand whose religious practices helped refugees to better adaptation by bringing the community together and creating a place of familiarity (Rangkla, 2013). Another example is the case of Iraqi refugees in Syria who used religious institutions and their networks to build a livelihood in exile (Zaman, 2012). Religion affects refugees and hosting communities not only through faith-based organizations. Admirand (2014) examined the narrative of migration and displacement in the holy books of Judaism, Christianity and Islam to identify the related hospitality traditions in these religions with the hope to use it to inspire ethical immigration and displacement policies. Other researchers have focused on religion's role by examining how the influx of huge numbers of Syrian refugees in Jordan affected the role of religious interpretations in maintaining the resilience of the charity system (Groot, 2014).

2.8. Critiques of mental health and psychosocial interventions

2.8.1. Lack of evidence for interventions

One theme that was evident in the literature was the argument that there is a lack of empirical evidence for mental health and psychosocial support interventions and initiatives. Put simply, the methods have not yet been systematically evaluated. This led a working group

formed by the 2009 Harvard Humanitarian Action Summit to reach a consensus that 'The absence of relevant research on mental health and psychosocial support in emergency settings is unethical' (p. 220). In most cases, those applying mental health and psychosocial support initiatives also do prior assessment and later evaluation which creates credibility issues (Allden et al., 2009).

2.8.2. Concentration on needs

The needs-based approach to deal with forced displaced populations is creating dependency, while at the same time it fails to meet the minimum needs of these people. One example is providing the affected population with calorie-based portions rather than quantity portions of aid, which are consumed fast, especially with no land to farm. Another example is introducing services like schools, which creates more expenses to people who own nothing. All this creates an imbalance of resources that facilitates exploitation (e.g. sex) of the population by some humanitarian workers with large amounts of resources (Ferris, 2007).

2.8.3. Excessive targeting

Due to the scarce resources in emergencies and wars, many of the donors and field actors prefer to focus on specific vulnerable groups, which leads to excessive targeting. One example is the case of child soldiers in Liberia who received far more aid and money than their communities, who then reacted negatively toward them considering what the child soldiers received as blood money (Wessells, 2009).

2.8.4. Political agenda

Breslau (2004) makes an argument that the narrative component of PTSD appeals to the international health field as it connects the symptoms to prior specific events; it also feeds into one of the sources of legitimacy of the international humanitarian system which is trauma discourse, and sometimes serves the political agendas of some groups. He gives an example from Nepal where the government treated PTSD in cases of refugees as evidence of

torture done by the government of Bhutan, especially regarding the fact that the Nepalese government played a role in selecting the torture victims in the interventions.

2.8.5. Western individual-focused approach

Individual-focused western psychology is not equipped for response to emergencies where the damage to the social structure of communities and support networks exceed personal losses (Wessells, 2009). Another problem is the lack of cultural sensitivity, which could lead to unintended harm. One example is the case of Iraqi refugees in Jordan who found it hard – due to social stigma – to seek professional mental health help (Almakhamreh & Hundt, 2012).

2.9. Discussion and conclusions

This literature review reveals that needs of refugees and their problems extend beyond the direct effect of war to the hassles of daily life, especially in the case of prolonged displacement. 'Daily stressors' is a term widely used in the literature (Miller & Rasmussen, 2010) ; yet we suggest that the concept of *secondary stressors* (Lock et al., 2012) could be adapted to better describe the group of chronic stressors that refugees of conflict faces during prolonged displacement that are not directly attributable to war, but are a socially mediated consequence for displaced people in developing countries. However, the secondary stressors typology was developed for natural disasters, and so it needs to be adapted accordingly or a new one developed that fits conflict settings.

The clinical approach (focusing on PTSD) is important, but we need to give more attention to the other less developed approaches like psychosocial support interventions in regard to the effect of secondary stressors on the mental health of refugees. The literature emphasises the positive effect of communal response among refugees on mental health wellbeing, which poses a challenge as 'In most emergencies, there are significant disruptions of family and community networks due to loss, displacement, family separation, community fears and distrust'(IASC, 2007, p. 12). The literature review included cases where there was

evidence of intrinsic psychosocial support mechanisms among refugees responding to these stressors, in which identity as a member of a group or community played an important role. However, the process was not clear.

A related literature has investigated the process of social identity-based social support in mass emergency settings using the social identity approach (Tajfel & Turner, 1979) in social psychology, and specifically self-categorization theory (SCT; Turner, Hogg, Oakes, Reicher, & Wetherell, 1987). Thus a study of the London bombings in 2005 found that shared social identity was the basis of support behavior among strangers (Drury, Cocking, & Reicher, 2009a). In such studies, it appears that seeing oneself as a member of an affected community can create expectations of support which turn individuals into active agents capable of giving help and coordinating with others to achieve common goals (Drury, Brown, González, & Miranda, 2016; Williams & Drury, 2009). This analysis of the role of identities and groups in dealing with stress and creating wellbeing is part of the wider 'social cure' approach (Jetten, Haslam, & Haslam, 2012) of applied social psychology, some of which has been translated into field guides that takes this capacity for informal collective resilience into consideration in emergency humanitarian planning (North Atlantic Treaty Organization [NATO], 2008).

Given the prominence of evidence of informal group-based coping and the importance of communities, groups and identities in dealing with secondary stressors in the findings of this review, we suggest using the social identity approach to shed light on the role of collective coping processes and psychosocial support shared among refugees of conflict. Finally, we also suggest that such a development could help us to improve the effectiveness of some interventions that currently target the second level of intervention in the IASC pyramid of intervention (community and family support), that aims to use the capacities of the community (IASC, 2007). Understanding groups of refugees in social identity terms could help both explain and boost the collective resilience of such groups.

3. Paper 2: The Role of Shared Social Identity in Mutual Support Among Refugees of Conflict: An Ethnographic Study of Syrian Refugees in Jordan

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3.1. Abstract

In the midst of an unprecedented refugee crisis and the shortfall of aid organization resources, a shift toward utilizing the capacity for collective resilience in refugee communities could be helpful. This paper explores experiences of psychosocial social support among a community of Syrian urban refugees in Jordan, especially the kind of support that helps them deal with secondary stressors. We were specifically interested in the role of shared social identity as a basis of support and the sources of such shared identity. We conducted an 8-month ethnography that included observations and semi-structured interviews with 13 refugees. We found many examples of support among refugees, on both personal and collective levels. Some of this support was based on sharing the identity of "refugee" that stemmed from a sense of common fate. This is similar to the process identified in the literature on disasters. Psychological membership in the refugee group is stigmatic, but it can also lead to positive outcomes in line with the social cure perspective. However, we also found examples of support that were value-based or based on pre-existing interpersonal networks. Implications of the findings for models of group processes in stressful situations and the practical question of refugee support are discussed.

3.2. Introduction

The magnitude of the current forced displacement crisis is unmatched since World War II. According to the United Nations High Commissioner for Refugees (UNHCR) report (2016), there are now more than 65 million people who have been forced to leave their homes, and the numbers are increasing rapidly as more than 12 million people were displaced in the year 2015 alone. There are more than 20 million refugees registered with the UNHCR, and the majority of them are located in developing countries and are not expected to return for many years. In the context of a shortfall of aid organization resources, a shift toward understanding and utilizing the psychosocial capacities in refugee communities could be helpful. The study described in this paper therefore sought to explore the experience of psychosocial support among a community of Syrian urban refugees in Jordan. We were specifically interested in the role of shared social identity as a basis of support for dealing with secondary stressors in an urban setting, and the sources of such shared identity. To address this issue, we conducted an eight-month ethnography that included observations and semi-structured in-depth interviews with 13 refugees.

3.2.1. The Syrian displacement crisis

A large part of the steep rise in forced displacements is caused by armed conflicts in the Middle East, where Syria alone is responsible for more than 4.9 million refugees and 6.6 million Internally Displaced People (IDPs) during the period of March 2011 - June 2016. Most Syrian refugees are hosted in the neighbouring countries, namely Lebanon, Jordan, and Turkey (UNHCR, 2016b). The protracted displacement situation comes with serious challenges to the emergency intervention model that succeeds in saving lives but struggles to provide livelihoods to the refugees in the host countries, where in some cases a refugee gets aid as low as \$14 a month (World Food Programme [WFP], 2015) with restrictions on work. The UNHCR data shows that most refugees live in urban settings rather than refugee camps, which means increased pressure on the infrastructures of host countries, especially in

countries where refugees comprise a relatively large portion of the total population, like Lebanon which hosted 183 refugees per 1000 inhabitants in 2015 (UNHCR, 2016a).

The challenges arising from protracted displacement were analysed in a recent review of the literature, which found a wide range of stressors among the refugees (Alfadhli & Drury, 2016). These secondary stressors (Lock et al., 2012) do not direct arising from the emergency (war), but are socially mediated (i.e., a function of social organization subsequent to the war). These stressors fall into three main groups (Alfadhli & Drury, 2018b): financial stressors (including poverty, crowded housing, education and health expenses), environmental stressors (including documentation issues, moving into an unfamiliar environment and suffering from instability) and social stressors (including separation from relatives, prejudice, discrimination and exploitation).

On top of these challenges on the ground, the resources available to respond to such challenges are far from adequate. The UNHCR Syrian crisis response plan funds only half of the needed budget (UNHCR, 2016b). This situation should make us consider all available resources to help refugees in developing countries, such as the refugees' own informal social support capacities, a notion suggested by some approaches to collective resilience (e.g., Fielding & Anderson, 2008). A number of sources suggest that *psychological group memberships* are an important basis for such capacities in communities and ad hoc gatherings. Since psychological group memberships are a function of shared social identity, the social identity approach, and specifically recent work on the 'social cure', might be relevant to understand some of the processes of psychosocial support in the refugee community.

3.2.2. Social groups and identities as possible psychosocial resources for refugee communities

Shared social identity (Tajfel & Turner, 1979) could be the basis of mutual support among refugees to face their stressful environment, at both practical and psychological levels.

Social identity can be the basis for giving support in groups, in addition to having many positive outcomes on wellbeing (e.g., coping, health behaviours and clinical outcomes; Haslam, Jetten, Postmes, & Haslam, 2009). Studies suggest that social identity transition is a key concept to understand the effect of stressful events on wellbeing, as for example in the case of international students during life transitions where loss of social identity had a negative impact on their wellbeing (Praharso, Tear, & Cruwys, 2017). Identity transitions are clear in the case of refugees who receive a new label (official status) once they arrive to the host country, and have to acknowledge this label in order to receive services (e.g., food coupons from UNHCR).

Research on group processes in disasters (see Drury, 2012) suggests a possible process whereby circumstances create an emergent "refugee" identity which could perhaps be a base for psychosocial support among refugees, and hence a possible source of efficacy. A study of survivors of the 2005 London bombings suggested that shared social identity (SSI) emerged among strangers through common fate; this emergent SSI was the basis of helping behaviour among these strangers (Drury, Cocking, & Reicher, 2009a). Shared social identity was found to be a predictor of both expected support and coordinated support among survivors of the Chile earthquake of 2010 (Drury, Brown, González, & Miranda, 2016). Also, Vezzali, Versari, Cadamuro, Trifiletti, and Di Bernardo (2016) found that sharing distress increases identification, which suggests the relevance for refugees facing secondary stressors. In all these studies, it appears that seeing oneself as a member of an affected community can create expectations of support which turn individuals into active agents capable of giving help and coordinating with others to achieve common goals.

The London bombings study informed a field guide that takes this capacity for informal collective resilience into consideration in emergency humanitarian planning (NATO, 2008). This document is intended for "Major Incidents, Conflict, Disasters and Terrorism", which implies similarity between these different settings. However, the armed

conflicts setting can be different in regard to both the type of stressors and the emergent social identities that arise.

3.2.3. The limitations of identities

The notion of shared identities as a resource for support among refugees is evident in some of the refugee literature (Alfadhli & Drury, 2016), though these accounts lack any psychological specification of the mechanisms involved, and only include an occasional and general reference to the possible origin of this shared identity in common circumstances (e.g., Moulin, 2010).

Moreover, while there is much research to show the benefits of group membership based on shared identity, not all identities have been shown to have this beneficial effect, and this might be especially true in the case of refugees. Thus, the refugee label has a stigma attached to it as it's perceived as a lower status compared to locals and other nationalities, which is an example of identity as "social curse", rather than social cure. For example, perceived stigma among disadvantaged populations undermined their use of public services (Stevenson, McNamara, & Muldoon, 2014). This tension between the potential benefits of the refugee status and the stigma attached to it could lead to negative effects on well-being, similar to what has been found among homeless people who internalized the stigmatic label while receiving services based on it (Walter, Jetten, Parsell, & Dingle, 2015). Thus, the present study will examine how refugees orient to the "refugee" category: to what extent do they adopt it and use it to coordinate support amongst themselves or reject and instead draw upon other ways of categorizing themselves, or indeed other relationships, to deal with the secondary stressors they face.

Stigma may be one reason why the refugee identity may not easily be employed as a basis for mutual support. But there are other bases for support, such as the family, friendship or tribal network. When looking for sources for support in refugees of conflict communities, the literature points out the role of religion. In addition to helping the refugees cope with the

distress of war and exile (Rangkla, 2013), its teachings also provide moral grounds for providing help (Admirand, 2014) and its institution's resources can facilitate that help (Zaman, 2012).

Therefore, the aims of the present study were precisely to look not just at the extent to which refugees developed a shared social identity but to examine where any such shared social identity was located as a source of support in relation to other sources, such as interpersonal/family relations, and the role of religion. Within this we examine the extent that refugees negotiated the possible stigma of the refugee identity and did or did not use the category as a basis for giving help and coordinating, and the process underlying this. We therefore aimed to answer the following questions: First, what were the informal sources of support among the refugees? What were the supportive social relationships among refugees, and were social identities any part of these? Within this: what are the sources of these identities? Do they feel common fate? In what contexts? Second, to what extent did refugees experience (give and receive) support to deal with the secondary stressors? In what forms and levels does this support come?

We approached these questions through an eight-month ethnographic exploration among a community of Syrian urban refugees in Jordan that included participant observations and in-depth interviews.

3.3. Method

3.3.1. Procedure

The ethnography took place from 29th of September 2015 to 30th of May 2016 in Irbid, a city on the Jordanian border with Syria, as the city hosts more than 130,000 Syrian refugees (UNHCR, 2016b). In particular, most of the interview participants and the observations come from a neighbourhood known as "Daraa", named after the Syrian region that the refugee residents come from. The first author had the chance to embed himself in the neighbourhood by volunteering to teach in a school located in the middle of the three-

kilometre neighbourhood and lived next to the neighbourhood. The researcher started doing interviews after two months of his arrival, and used the time to get familiar with the environment and gain the trust of the residents. By that time, children started greeting him on the streets by name and title "teacher", which was considered as an indication that his presence in the neighbourhood gained some legitimacy.

The school was set up for the children of the Syrian refugees and run by a non-profit student organization. In addition to teaching photography, the researcher also participated in administrative roles, which gave him the opportunity to interact with the students' parents and families living around the school. The researcher kept a regular diary (21,062 words) that included information obtained through casual chats and observations he made in the neighbourhood, Syrian family homes, and while accompanying the refugees through activities such as shopping using food coupons, and getting necessary documents.

3.3.2. Interviews

Due to the exploratory nature of this study, we used semi-structured interviews. These gave space for the participants to tell their stories and experiences as refugees in Jordan, but also allowed us to ask them questions about topics that we were interested in, based on the literature. The interview started with an open question to the participant asking them to tell us about their experience as a refugee in Jordan. The interview schedule included questions about the following topics: how and when the participant became to see himself as a refugee; relations with other refugees and other groups; change in social relations compared to prewar; daily life needs and challenges and problems they face; the support available and the sources of it; and finally, about their wellbeing and any mental health issues.

The questions asked to the participants developed by adding new questions that emerged from observations and participant answers, or dropping old ones for topics that were judged to be saturated. For example, at the beginning of the fieldwork the first author was aware of only one type of refugee ID document, but as he started doing interviews, he learned

about other types of documents and started asking about them. After a while, he stopped asking about the process of acquiring an identity document as the answers became redundant.

Interviews lasted between forty minutes to one hour; they were conducted in Arabic and audio recorded using the first author's phone. The researcher (who is a native Arabic speaker) transcribed the interviews and then translated them to English.

3.3.3. Participants

The ethnography took place in a neighbourhood located in the city of Irbid on the northern Jordanian borders with Syria. All the interviewed refugees (Table 3.1) were residents of that neighbourhood. The researcher had some interaction with female Syrian refugees, but had less chance to do interviews with them due to cultural restrictions on cross-gender private meetings. He did two interviews with local Jordanian relief workers who worked with Syrian refugees from the beginning of the crises to check for other accounts regarding the stressors refugees face and their social dynamics.

Participant	Gender	Age	Region of origin	Job in Irbid	
1	М	Mid20s	Homs	Student	
2	М	Late30s	Daraa	Unemployed	
3	М	Mid30s	Daraa	Relief worker	
4	М	Mid20s	Damascus	waiter	
5	М	Mid50s	Daraa	Unemployed	
6	М	Late30s	Daraa	Unemployed	
7	F	Late20	Daraa	Part time teacher	
8	F	Mid30	Daraa	Unemployed	
9	М	Early40s	Damascus	Unemployed	
10	М	Mid50s	Daraa	Unemployed	
11*	М	Late30s	Mafraq	Relief worker	
12	М	Mid20s	Daraa	Hotel worker	
13	М	Mid20s	Homs	manager	
14	F	Mid40s	Daraa	Unemployed	
15*	М	Late20s	Mafraq	Relief worker	

* Jordanians

3.3.4. Recruitment

To ensure a trust-based relation, the researcher introduced himself and his purpose as a researcher to possible participants when he met them for the first time, but allowed multiple meetings before inviting them for an interview. In some cases, the researcher was introduced to possible participants through a mutual friend (usually a volunteer).

3.3.5. Analytic approach

This analysis is guided by a rich literature about the conditions of refugees of conflict in developing countries and the literature on shared social identity-based support, which helped us both to clearly define the scope of study and generate precise research questions that this study seeks to answer. However, due to the fact that our research questions are also drawn from the literature on mass emergencies which is different from the setting of refugees

of conflict, it required a more careful and flexible approach to analysis that allowed us to identify both the similarities and differences between the two settings. Our thematic analysis was theory-driven with flexibility in coding process and generating themes (Lyons & Coyle, 2016). We had two main themes in mind (support and social relations), but other than that, we started coding the interview data from the lowest level possible and then identified the relations between codes and merged or split some of them, where needed. For example, we started screening interviews for examples of support, and then decided that a group of these examples has a common theme of *collective* help.

Ethics statement

The University of [name removed to maintain anonymity] ethical review board approved the study on 9th of June 2015 (approval certificate number ER/KHTA20/3).

3.4. Analysis

First, we describe the levels of identification with other refugees among most of those who participated in providing social support (Table 3.2). We show how new social relations were created in the exile which were distinctively different (different regions and classes) from the pre-war situation. When asked about the roots of this identification, refugees said that it stems from the shared suffering as refugees (common fate). We also present a minority of cases who showed alternative sources of support, other than shared *refugee* identity.

Second, we explore the different forms of help reported by refugees and which we observed among them. We show that some of these were linked to the emergent refugee identity.

The extracts and observations we present in this section are chosen as being representative of statements found in the data set.

Helped	Did not help		
Identified with other refugees	Did not identify with other refugees		
Motivated by group membership	Moral motive	Tribal motive	
P3,P5,P6,P7,P8,P9,P12	P1,P4,P13	P2	P14, P10

Table 3.2: Distribution of participants based on involvement in providing help, identification & motives

3.4.1. Social Relationships as Resources

We examined how refugees turned to their social relationships looking for sources of help. Among those who helped and received help, we found identification with other refugees, in spite of the clear stigma attached to it. Identification with other refugees appear to stem from the perception of common fate, which were evident in the contexts that treated the individuals as members of the "refugee" group.

3.4.1.1. Social relations dynamics. The effect of crises on social relations varied from one refugee to another. One participant reported that his relations were restricted - as before – to the circle of relatives:

Int: relations with Syrians?

P2: Everybody mind his own business. Not that good. The strong relations are between relatives only. Other Syrians just say hi to them. (Participant 2)

Three other participants suffered a reduction in their number of relationships, which became limited to a small circle of friends and relatives due to the challenges of the displacement conditions:

Before, relations were wide, but now it's tight. You cannot relax in relations, it comes with commitments which I cannot afford. So I keep it narrow with people who knows me very well. If I have a guest I cannot avoid doing a feast [pause] that's our tradition. But with my close friends, a cup of tea will do it. Relations have shrunk a lot since the crisis. (Participant 10)

However, more participants reported an interesting change in social relations due to the displacement environment:

I never imagined that I would ever know people from areas like I do now. One positive aspect of the crisis is that it introduced us to the whole spectrum of the society, specifically after being a refugee. We used to say "Homsian or Daraan" but know we just say "Syrian" [pause] the sub-identities dissolved. (Participant 9)

Here, we see an example of one important effect of the displacement which caused a physical re-shuffle where refugees have little choice of where to live, which leads to exposure to refugees from more diverse backgrounds (different regions, tribes, and socio-economic status), than they are used to in their hometowns before the war. While displacement gets prolonged over the years, such exposure creates a new network of social relations.

3.4.1.2. Shared social identity. As shown in the previous example, many participants showed high identification with other refugees, regardless of the region. In order to examine if the shared identity is a pre-war existing identity or an emergent identity from the situation of being a refugee, we had two pieces of evidence. First, there was the change in social relations to include more regions and classes than before, which is based on common fate (see below):

I do not discriminate between any Syrian refugees regardless of where they came from, Homs or Aleppo or Daraa, we all Syrians [pause] we have same problems, same worries, we open our hearts to each other [...] I noticed that my circle of relations has

expanded a lot comparing to what it used to be in Syria, as now I have relations with all of Syrian society spectrum (intellectuals, teachers, doctors, etc). My relations used to be restricted within my region [of origin] but now, in one place, I would be with people from Homs, Aleppo and Damascus, people I wouldn't meet back in Syria. (Participant 5)

I witnessed some of these casual social meetings, which included some previous military people, a doctor, a politician professor, and a farmer, from different regions of Syria (Observation on April 22nd, 2016). In other occasions, I saw Syrians from rich families helping (money, teaching, treatment) poor Syrians from other regions (multiple observations in the school and aid distribution).

Second, some of them even identified with other refugees who are not Syrian:

I feel the other refugees' [pain], not only Syrian refugees, even Iraqi refugees. When I've heard in the news about refugees in Burma, I was very sad. I felt sorry for the Palestinian refugees who experienced this twice, once from Palestine to Syria and then from Syria to Jordan. I feel sympathy toward any human being who became a refugee. (Participant 7)

Int: Any other groups that you feel belonging to?

P12: Maybe Palestinians, as they feel what we feel and saw what we are seeing [pause] they know what it means to be a refugee. Their situation in Jordan is better than us, as they have been here longer than us, but at the same time they lost their home land, as we lost ours. We share the same pain. (Participant 12)

Here, we can see evidence that a community of refugees is forming, beyond the mere physical proximity of the neighbourhood with its high concentration of Syrian refugees. The

borders of the new group are set by a sense of membership and belonging in relation to other refugees; some of them were not considered ingroup before the war, and in some cases they are not even Syrians. This sense of shared identity is crucial to activate the newly formed social network to achieve the community (refugees group) goals, as they share the same situation and challenges (secondary stressors).

However, not all Syrians identified with other refugees:

Int: Do you feel belonging to the refugees in general?

P4: No, I did not need many people.

Int: Do you belong to refugees from your region more?

P4: Damascus? No, in fact I stay away from them. (Participant 4)

Many participants showed during the interview a negative attitude towards the label "refugee". Their reactions ranged from getting emotional when they thought of themselves as refugees to a total rejection to acknowledging that they are refugees (even those who are registered with UNHCR and are receiving aid). There was an obvious stigma attached to the "refugee" identity, which may have led the participants to use the "Syrian" identity instead of refugee in their casual conversations. Furthermore, in some cases the stigma was even attached to the national identity of being "Syrian", as a Jordanian relief worker told us about an example of verbal discrimination toward Syrian refugees:

Here, people still call a refugee as an example "Abu Ahmad the Syrian" "Om Ahmad the Syrian" "that Syrian boy". They say the name followed by "Syrian". The other day I met a man who asked me "why do they call me Syrian Abu Ahmad? My name is Abu Ahmad. Why do they have to remind me that I am Syrian?". I told him that they probably that was with good intentions. He said "but that affects me. I don't like it. I like to be called Abu Ahmad" (Participant 15)

I noticed that some of the items (e.g., jacket or bag) refugees receive have the donor's logo on it, which could lead to being singled out as a refugee from others and thus creating such a stigma. (Multiple observations)

As suggested in the interviews and observations, the identity of being a refugee appeared to invoke negative emotion among many participants. However, refusing the "refugee" label and denying it publicly should not necessarily be treated as a measure of disidentification with other refugees, as some participants did identify with other refugees and supported them while refusing to acknowledge the 'refugee' label and masked this shared identity with the national (Syrian) identity (participants 1, 2, 4 and 13). A central question of this study is regarding the role of shared social identity in support among the refugees, and based on the interview data, we found that shared social identity-based support was the most common kind of support described by participants. Seven (more than half) of the participants identified with other refugees as members of their group and provided support to them. Four participants (1, 2, 4 and 13) provided support to other Syrian refugees without acknowledging their membership to the refugee group, while two participants (10 and 14) had limited relations with other refugees and were not engaged in social support activities (see Table 3.2).

3.4.1.3. Common fate – distal and proximal. When asked about the reason behind their identification with other refugees, interviewees pointed out that they share the same situation and suffering:

only we feel our pain. You cannot feel our own pain, but you can ask a Syrian and they would tell you. Unity is here because we share the same pain, the same injustice [pause] in spite of the conflicts that sometimes happen between us, we share the same pain [pause] we have one goal, one word. (Participant 9)

Evidence of the link between common fate and the shared experience of challenges among refugees was found in situations where refugees were treated as a group by others and the processes that Syrians go through together as refugees. These served to highlight their common circumstances and thus shared identity. One example comes from the blood test, which is a requirement for getting the Jordanian identity document for refugees. Refugees must go to a designated health centre during specific hours, where they wait together and are able to talk and see themselves as a category of people (Observation on February 7th, 2016). Refugees also get this feeling of common treatment from similar situations in daily-life:

P12: When I walk in the street and they start call me "You, Syrian. You are Syrian, this is a Jordanian, this is an Egyptian". This discrimination is suffocating us, and distressing. It makes us feel sympathy toward each other. When I see a Syrian refugee needs support, emotional support, practical support or material support, I will help them.

Int: Do you feel belonging to refugees from your hometown, or refugees in general? P12: From all regions, all Syrians have the same pain, same goal. What I'm going through here, I'm not going through alone, all the Syrian refugees experience it, we all tasting the same glass. As an example, the Syrian worker is treated differently than Jordanian workers in salary, and they even give him the hardest work.

These constant negative reminders of the refugee identity seem to highlight and boost the sense of belonging toward others who share the same experience, among the participants. Living as a refugee in an urban setting (versus refugee camp) seems to enforce such sense of common fate and shared identity with other refugees due to the contrast with the locals and other nationalities who have different living conditions and legal situations compared to the refugees.

3.4.2. Different Forms of Support

We found evidence that being part of the refugee community helped the refugee facing all three types of secondary stressors (financial, environmental, and social). Although unexpected due to the poverty refugees suffer from, we found examples of refugees sharing items between them (e.g., furniture or medicine). Refugees in particular offered substantial support to new families moving in their area, by sharing an apartment with them and guiding them through whatever they needed to know about the new area and the services available to them. Social support was not only available among the refugee community, but was a priority to the Syrian refugees who preferred to pay higher rent to stay living near each other.

As we were examining the processes establishing the basis for support, we grouped the forms of support we observed and heard about into three types: collective help, personal help and non-refugee identity-based help.

3.4.2.1. Collective help. We found examples of collective support, where the refugees came together as a group of refugees and helped fellow refugees. Some of these initiatives were improvised to meet a specific need of refugees while other initiatives were established to meet a sustained need of the refugee community. These forms of help in particular give us a clear example of how shared identity facilitates social support by empowering members of the group to be active agents to face common challenges. These included teaching after school classes to Syrian children, running extra-curriculum activities, and organizing aid caravans to the refugee tents on the outskirts (multiple observations). The following is an example of collective support that is formal and provides services usually offered by the NGOs:

There was a group called Ahaad (عهد) started by Syrian students in Irbid got together to see what they can do. They get support from Jordanians but the members are Syrians and the beneficiaries also Syrians [pause] a student organization. We had a

storage for food, clothes, toys and gas, etc. From time to time we would rent a playground, a bus and then ask the parents to take the kids to play for a full day programme [pause] we provided sandwiches, juice and water. The kids used to laugh and enjoy playing, and we used to give them gifts like colouring pens [pause] something simple and practical, then we take them back home. Also, from time to time we do go around and distribute aid in student cars. (Participant 1)

A different form of collective initiative that tended to the needs of the refugees was helping them navigate through the bureaucratic and legal system of the host country. The first author witnessed a live example of such help; just after interviewing a participant who was, with a group of friends, providing legal help dealing with the local authorities, two young refugees came in asking for help for their relative who was arrested and scheduled for deportation (Observation, March 10th, 2016):

I try to help with other friends [pause] I have a Jordanian friend. We've dedicated a year of our time and effort to help other refugees [pause] if anybody have a government procedure in Ministry of Interior or an embassy and have difficulties, we help to facilitate it (through connections) [pause] we make him feel solidarity. If a family got into any trouble we go there and try to solve it or provide help. (Participant 5)

These examples of collective help are important evidence of the emergent sense of community among the refugees, as they require a high level of coordination, which appears to help with the common issues the refugees appear to struggle with the most. These collective initiatives also involve motives that go beyond doing a personal favour.

3.4.2.2. Personal help. On a daily basis, we found that the most common form of support refugees provided each other came in the form of personal help. This type of help was mobilized through personal relations and resources (e.g., neighbours) rather than organizational resources. In this case, we can see examples of support that draws from the social relations created by displacement between refugees from different regions, who go through a common life experience.

When a new Syrian refugee arrives, they know nothing.. I have some stuff so I send it to them.. when I get aid from charity, I would let him know.. I would guide him to register for the UNHCR. (Participant 8)

3.4.2.3. Other sources of help (not based on 'refugee' identity).

Values based. It is important to note that shared identity-based help was found to be the case among the majority of participants who participated in support. However, we also found three participants who helped Syrian refugees based on personal values, without sharing neither the common fate nor adopting the refugee identity:

Int: Is there any change in your social relations now, compared to back in Syria? P13: No. In Syria I spent my time with relatives and same here. Cousins and uncles, nothing changed. I do have new relations, but mostly with people from [city of origin].

Int: You said that you helped Syrian refugees. What made you do it? P13: I felt a duty [pause] people in need [pause] maybe a moral duty. National identity and such is all rubbish [pause] I help a human being, let aside the national nonsense. Maybe (I do it) as a good deeds [pause] it might not be even related to religion. I just feel it coming out of my soul, to help someone.

Although these interviewees offered alternative explanations for support among the Syrian refugees, two of the three participants provide evidence for how shared social identity stems from common fate, as both participants came from rich families and had a relatively secure future. Indeed, they reported shared negative experiences (legal and discrimination) but it seems that they perceive their general situation as significantly different from average Syrian refugees.

Pre-existing social networks. Considering the tribal and conservative nature of southern Syrian culture, it was no surprise to find that family, tribal and regional social networks as an important source for support among Syrian refugees. However, only one participant reported that they offered support exclusively to his tribe members:

Int: relations with Syrians?

P2: Everybody mind his own business [pause] not that good. The strong relations are between relatives only, other Syrians is just saying hi to them [...] when I get a sponsor, I help my relatives.

Int: any collective efforts or initiatives among refugees themselves?P2: maybe some one time thing like in Eid Aladhhaa (distribute meat) [pause] Just friends doing things together.

Int: did you joined any?

P2: No, I did not join such initiatives. Excuse me, but nobody asked me to.

Except for one case where the participant who was not interested in supporting refugees other than his tribe, it seems that pre-existing networks are not in conflict with the networks of support formed in exile. In fact, and as in the case of collective funds established

by expats (relatives of refugees), it seems that the newly formed social network facilitated the support and resources provided by the pre-existing networks.

3.5. Discussion

In the context of the insufficient services provided to the refugees by the International NGOs like UNHCR and local charities, we found that refugees provide informal help within the refugee community. We found that the majority of our participants considered themselves in one group with other refugees and provided support to them in many forms (collectively and personally). We did find cases were refugees did not offer help to other refugees or receive help from them, and in other cases help was offered based on personal motives like morality or constrained within tight circles of pre-existing familial or regional relations. Thus, we want to emphasise that shared social identity does offer a valid explanation of support in the refugee' community, as an important source among other sources of support.

However, we found identification with other refugees based on common challenges that arise from being a refugee as the most common pattern in our sample and observations. Some refugees disguised the "refugee" identity with the "Syrian" identity due to the stigma attached to being a refugee. We found evidence of radical changes in the social relations of refugees in exile, where new relations were formed with refugees from different regions and classes.

Syrian refugees in Jordan suffer from separation from their families and traditional social networks, which have a strong impact on their wellbeing that makes them consider going back to Syria even though the war is still going on. The refugees perceive their "refugee" status as of lower status than their Jordanian hosts, which causes them discomfort. The stigma attached to the "refugee" label is worsened by the negative attitude from some Jordanians (Athamneh, Momani, & Radaideh, 2016).

3.5.1. Extending the Social Cure

The interviews showed a range of ways that refugees face their needs ranging from being independent or getting help either on a personal or collective level. In addition to being a source of support, the analysis also showed that social relations could be a source of stress. We found that most of the social support reported by the participants was facilitated by new relations created in exile based on the shared refugee identity, and came in many forms and levels (personal and collective). It is worth mentioning that in some cases refugee-based relations were working in harmony and complementing pre-existing relations (e.g., distributing aid provided from relatives abroad).

The fact that social relations can be a source for both stress and relief fits the concept of *social cure* were "others can be hell or heaven", which emphasizes that it's not the mere act of giving or receiving that counts, but also relationship with the other (Haslam, Reicher, & Levine, 2012). High identification with other refugees was clear in the case of the participant who also provided help to other refugees. In order to examine if the "refugee" identity was the base of identification with other refugees rather than the pre-existing national "Syrian" identity, we used two pieces of evidence. First, the radical change in social relations of refugees in exile, where new connections have been formed with refugees from outside the previous traditional circles (region and class). Second, some refugees showed identification with other refugees who are not Syrian (e.g., Palestinians) because they went through the same situation.

Research shows that in emergency settings those affected often consider themselves as members of the same group and start to draw on this membership to be active agents to face the common challenges and provide help to each other (Drury et al., 2016; Williams & Drury, 2009). Shared social identity provides a basis for being motivated to give others (in the same group) support, for expecting support from them, and for being able to coordinate together to provide support for the whole group (Drury, 2012). The present study provides

suggestive evidence that psychosocial support among refugees operates by a similar mechanism to what has been found in other emergency settings, since here too people without previous connections come to see themselves as members of the same social group or category and offer support on that basis.

3.5.2. Limitations

This study was designed to achieve a deep exploration in a small community seeking initial answers and suggesting hypothesis that should be investigated in further research. Thus, there are issues about generalizing the results of this study. We focused on urban refugees in developing countries mainly due to the fact that they constitute the majority of refugees globally (UNHCR, 2016a). We should be careful not to necessarily apply the results of this study to refugees in camps or in developed countries, as these setting vary in the type of challenges, including in social identity dynamics (e.g., between the refugees and the locals).

Additionally, the interview sample was small and not necessarily representative of other urban refugees, for two reasons. First, the neighbourhood that the ethnography took place in was not highly diverse, as the majority of the refugees (9 out of 13 interviews) were from the same region in Syria (Dara'a). Second, the researcher had a lower chance to do interviews with women (only 3 interviews) due to cultural restrictions on cross-gender private meetings.

3.5.3. Recommendations and Conclusions

We hope that we have shed some light on the possible role of shared social identity in psychosocial support among refugees of conflict in developing countries. Such understanding should help us recognize the capacities embedded in the refugee communities and design better community-level interventions that utilize the existing networks of support, or at least inform policymakers so they avoid undermining such mechanisms. Specifically, we recommend social identity-based interventions (e.g., countering social isolation), which have

been found to be beneficial for mental health (Haslam, Cruwys, Haslam, Dingle, & Chang, 2016). Based on this, we recommend that interventions can best utilise the capacity of refugees by including them in the intervention design and approaching them as a group, instead of as individuals. Field guidelines for practitioners working with refugees can also benefit by being aware of the positive role of shared "refugee" identity and how it can be empowering instead of stigmatizing. Indeed, refugees do help each other, but it is important to understand that refugees depend on external help, and they have a far greater capacity to do even better if provided with much needed resources.

4. Paper 3: A Typology of Secondary Stressors Among Refugees of Conflict in the Middle East: The Case of Syrian refugees in Jordan

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4.1. Abstract

Introduction: As the years of displacement accumulate, the burden of secondary stressors (i.e., stressors not directly related to war) increase on the shoulders of millions of refugees, who do not have the option of either returning home due to war or of having a sustainable livelihood in the host countries. This paper aims to shed light on the overlooked importance of secondary stressors among refugees of conflict in developing countries; it will do this by highlighting the experience of Syrian refugees in Jordan and developing a typology of these stressors.

Methods: We approached this issue using two levels of exploration. In study 1, we used participant observation and 15 in-depth interviews in Irbid, Jordan. Data were analysed qualitatively using thematic analysis to explore the different types of stressors. In study 2, a questionnaire survey among Syrian refugees in Jordan (n = 305) was used to collect data about a wide range of stressors. Responses were subjected to factor analysis to examine the extent to which the stressors could be organised into different factors.

Results: The thematic analysis suggested three different types of secondary stressors: financial (money related), environmental (exile structures and feelings created by it), and social (directly related to social relations). The factor analysis of the survey data produced a similar typology, in which secondary stressors were found to be grouped into four main factors (financial, services, safety, and relations with locals). The final result is a typology of 33 secondary stressors organised in three main themes.

Discussion: Syrian refugees in Jordan suffer the most from financial stressors, due to loss of income and high living expenses. Environmental stressors arise from exile and are either circumstantial (e.g., services and legal requirements) or created by this environment (e.g., instability and lack of familiarity). Social stressors were observed among a considerable section of refugees, varying from stressors due to being targeted as a refugee by the locals (e.g., discrimination) to more traumatic stressors that came from both locals and other

refugees (e.g., assault). The typology of secondary stressors suggested by the present analysis needs to be investigated in a larger sample of refugees of conflict in other countries in the Middle East, in order to determine its generality. We suggest that it is a basis for a framework for practitioners and academics working with refugees in the region.

4.2. Introduction

The aim of this paper is to identify the stressors arising from the exile environment among refugees of conflict in the Middle East and to explore the relationship between different stressors, in order to provide the foundation for classification and measurement of such stressors that could be helpful to both researchers and practitioners working with refugees in the region. To achieve this goal, we first conducted a qualitative study (ethnography) that included observations and 15 in-depth interviews with Syrian refugees and local relief workers in Jordan to identify the main themes of such stressors. The second study was a survey (n = 305) among the same population to get a sense of the most prominent stressors and to validate the thematic structure of study 1, in addition to identifying factors of related stressors that can be used as a first step towards building a scale for assessing secondary stressors in the region. Before describing the research we provide the background and explain the need for our analysis.

4.2.1. The current refugee crises

The United Nations High Commissioner for Refugees (UNHCR, 2017a) global trends report for 2015 1 shows that the current forced displacement crisis is the largest in modern history, exceeding the situation at the end of the Second World War. More than 65 million people have been forced to leave their homes, and 86% of them are hosted in developing countries1 . These people are not expected to return home soon, as the current forced displacement is characterised by a prolonged duration, where refugees spend an average of 26 years in host countries (UNHCR, 2016a).

Jordan is an example of the refugees' impact on countries in areas of armed conflict like the Middle East. Jordan's current population is 7.5 million, including 656,170 Syrian refugees who have arrived since 2012 (UNHCR, 2017b), and 2,117,361 Palestinian (United Nations Relief and Works Agency [UNRWA], 2017) refugees who were forced to leave their country by the Israeli occupation, more than 50 years ago (UNRWA, 2018). However, as

with many countries in the region, Jordan has not signed the 1951 Refugee Convention (UNHCR, 2011).

The international response to the forced displacement crisis falls short in meeting the persistent challenges facing the majority of refugees, where funding for the relief responses in developing countries is far from meeting the needs in the areas where demand is high. For example, the humanitarian funding appeal in Jordan in 2016 covered only 22% of projected costs (UNHCR, 2017c). This shortfall leaves refugees with little support in facing stressors associated with prolonged displacement, which increases the negative impact of such stressors on their well-being.

4.2.2. War trauma and distress, in context

When thinking about refugees of war, it is easy to recall many mainstream media images of the trauma of war forcing refugees to flee their homes. However, the untold story of exile is different as "affected people often identify as their greatest sources of distress, not the memories of past violence and horrific events but the problems of everyday living" (Wessells, 2009, p. 8). The World Health Organisation and International Medical Corps 7undertook an assessment of the mental health and psychosocial needs of Syrian refugees (n = 7964) in different regions of Jordan. They found that the most common mental health concern reported by the refugees was "Worry and concern over the situation, relatives and the future", followed by "Fear from environmental threats". When asked about the help they needed, the top priority was "To improve services and living conditions", while only 13% expressed a need for "Counselling or psychological support".

Recent studies have found a relatively high prevalence of post-traumatic stress disorder (PTSD) among Syrian refugees in neighbouring countries (Ghumman, McCord, & Chang, 2016). However, for a more contextualised understanding of the status of trauma among Syrian refugees, we should take into consideration that there are factors other than war exposure that contributes to PTSD. Rather, some of these arise from the exile environment. Al-Smadi et al.'s study (, 2016) shows low scores for PTSD among the majority of Syrian refugees in Jordan, and that the higher scores are associated with factors not directly related to war – chronic disease diagnosed in exile. Basheti, Qunaibi, and Malas (, 2015) also found an association between psychological distress and living conditions; refugees in tents had double the rates of refugees in caravans. The previous literature is best summarised by Miller et al. (, 2008) who argued that "daily stressors" have a direct effect on mental health among refugees of conflict, in addition to increasing the negative effect of trauma on mental health. This conclusion also supported by later studies (e.g., Jayawickreme et al., 2017; Miller, Omidian, Rasmussen, Yaqubi, & Daudzai, 2008; Schafer, Masoud, & Sammour, 2014)

4.2.3. Examples of stressors

Stressors arising from the exile environment cover a wide range of challenges among refugees from different regions, although some of these stressors are sensitive to context. The literature on refugees of conflicts in developing countries provides us with examples of such stressors: among refugees in Afghanistan, these include overcrowded housing, poverty, unemployment, the security situation, violence in the home, poor health and pollution (Panter-Brick, Eggerman, Mojadidi, & McDade, 2008); El-Shaarawi (, 2012) reports inaccessibility to (work, education, and health) services, social isolation and separation from family and friends, decline in living standards, in addition to a status of uncertainty about the future among Iraqi refugees in Egypt. Even using unfamiliar transportation was found to be stressful, as in the case of Darfur refugees in Sudan (Badri, den Borne & Crutzen, 2013).

4.2.4. Secondary or daily stressors

Some studies among refugees of conflict use the term "daily stressors" in referring to stressors arising from the exile environment (e.g., Miller, Omidian, Rasmussen, Yaqubi, & Daudzai, 2008; Panter-Brick, Eggerman, Mojadidi, & McDade, 2008), which we suggest is problematic for two reasons. First, some of these stressors are not daily (e.g., physical attack). Second, the term is sometimes used in the literature in contrast with traumatic stressors although some of the "daily stressors" can be traumatic (e.g., domestic violence). Therefore, we recommend using the term "<u>secondary stressors</u>", as found in the disasters literature, which describes this group of stressors as "continuing or chronic problems that ... are not directly related to or inherent in the event" (Lock et al., 2012, p. 3). For this study, we define secondary stressors as stressors not directly related to war (arising from exile environment), and which are socially mediated in nature (operating through the societal response – or lack of societal response – to the events).

4.2.5. Goals of the paper

Based on the literature showing that secondary stressors among refugees of conflict are important but receiving less attention, and the fact that the few examples of research that focus on them were conducted outside the Middle East when the Syrian crises is a main contributor of the current global displacement crisis, we decided to focus on Syrian refugees in Jordan (which is a major refugee host country in that region) to explore the forms of secondary stressors among them, in two stages. In study 1, using an ethnographic framework we conducted in-depth interviews to identify types of secondary stressors and common themes between them. In study 2, we undertook a survey (N = 305) in order to examine the relation between stressors (factor analysis), in addition to assessing the most common stressors among the refugees.

In addition to advocating using the term "secondary stressors" to describe the stressors facing refugees of conflict in exile, the typology we developed can be helpful to both practitioners and academics working with the refugees of conflict in developing countries, by identifying the specific domains that the refugees are in need of support, and the relation between stressors.

4.3. Study 1

The aim of study 1 was to identify some of the range of stressors that the Syrian refugees in Jordan encounter, some of which could be specific and sensitive to the setting. To achieve that, we conducted an 8-month ethnography among a community of Syrian refugees, where we collected contextual data from trust-based in-depth interviews and participant observation by the first author.

4.4. Study 1 Method

Participants. The interviews (n = 15) all took place in the northern region of Jordan, by the Syrian borders. Most of the participants were from the nearby Syrian region of Dara'a, which is on the southern Syrian borders with Jordan, and were recruited through the first author who served as a volunteer in a neighbourhood heavily occupied by Syrian refugees. We interviewed 13 refugees who were residents of the neighbourhood, in addition to two local relief workers who worked with Syrian refugees for several years. Only three interviews were with women, due to the local culture restricting private interaction between females and males (the first author being male).

Procedure. The first author collected data in the form of in-depth interviews and participant observations, during his 8-month period as a volunteer in a school located in a neighbourhood predominantly inhabited by Syrian refugees. The first author made it clear (whenever meeting someone new, in addition to later reminders) to the school management, other volunteers and the community members that the main purpose of being there was to collect data in the forms of observations and interviews.

The interviews were undertaken after establishing trust-based relations and then snowballing recruitment. Interviews lasted between 40 minutes to one hour and were conducted in Arabic and audio recorded using the first author's phone. The researcher (who is a native Arabic speaker) transcribed the interviews and then translated them to English. The researcher also kept a regular diary (21,062 words) that included information obtained

through casual chats and observations he made in the neighbourhood, in Syrian family homes, and while accompanying the refugees through activities such as shopping using food coupons and getting necessary documents.

Analysis. Due to the exploratory nature of this study, which aimed to lay out a foundation for a typology of secondary stressors, we adopted a grounded approach (bottom-up) to analyse the data. We used Big Q thematic analysis, which is flexible and involves an organic coding process (Lyons & Coyle, 2016). We started coding the interview data from the lowest level possible and then identified relations between codes themes and merged or split some of them where needed. The extracts and observations we present in this study are chosen because they are representative of statements found in the dataset.

Sussex University Science and Technology Cross-Schools Research Ethics Committee approved this study in July 2015.

4.5. Study 1 Results

We identified three main groups of secondary stressors (financial, environmental and social) among the participants, which they suggested were common among Syrian refugees in Jordan. Consistent with the literature (UNHCR, 2015b), the interviews suggested that these participants struggled more with the secondary stressors than the memory of war or its direct effect on their life (e.g., deaths of relatives in Syria).

4.5.1. Financial Stressors

This group of stressors is a result of the forced displacement of refugees from subsidised Syria to the relatively more expensive Jordan, losing their previous sources of income, and facing challenges finding jobs in exile due to restrictions on refugees' ability to work. We identified poverty as the main financial stressor that most of the participants faced, in addition to three other stressors (residence, education and health) that arose from the financial strain that the refugees faced.

4.5.1.1. *Poverty.* Syrian refugees left their homes to travel to Jordan in order to escape from a life-threatening military operation and deteriorating basic services, with the hope that their forced displacement would be for only a few months:

We came [to Jordan] on a temporary base. We couldn't wait to get back. I even did not say goodbye to my family. We had in mind 2-3 months maximum. Participant 7

With the priority to save life and as a temporary solution, many of Syrian refugees walked away from their jobs, farms and shops across the borders with Jordan with little savings:

Even if you have some savings it will be gone, especially when you are not allowed to work [pause] The financial ability of people diminished as the crisis prolonged. Participant 9

In addition, the Syrian refugees faced a serious financial challenge as they moved from less expensive 'socialist' Syria (where basic services were subsidised by the government) to more expensive free market Jordan, and had to face additional inflation caused by hundreds of thousands of refugees who moved out from self-owned houses in Syria to rent limited housing units in Jordan for high prices:

We did not have to worry about rent, electricity and water bills. [pause] We had free education and health services [pause] Here everything needs money. Participant 2

Refugees have little financial support in facing such challenges, as they depend on the UNHCR which provides food coupons (around \$21 per person monthly) for registered refugees, in addition to some irregular aid from charities:

In the beginning, the aid from UN was available [pause] it was fine, but now it's less. Instead of 24JODs(\$33)/person, now they give 10-15JODs(\$14-\$21) or even cancelled it for some people. I still receive the [food] coupons 15JODs(\$21), which are only enough to provide us for 20 days. The rest of the month we have to take loans from friends or find any work to survive. Each month, we receive a text message to inform us that the coupon debit card is charged, then we go to the authorized outlets to buy grocery. We are only allowed to buy food [using the coupons]. Participant 2

A smaller group of refugees receive a monthly allowance after being evaluated and approved by home visits undertken by a team from UNHCR, although such payments are not reliable. The refugees call it "the retina" because the payment is through ATMs with a retina scanner:

We receive 100JODs(\$141) to pay toward the rent, that's all [pause] the Retina [monthly salary][pause]. They came to evaluate our home, twice in the same month [pause] two persons each time. They evaluated and approved us, but then it was taken away. So we went back struggling with the rent. This is an on-going suffering. The monthly salary was cut off for 4 months and then returned, but they have cut it again now.

Participant 8

During the first author's visits, he noticed the simple furniture in the crowded homes of Syrian refugees, and torn clothes on some of the children. In addition, there were examples of how living in poverty can increase expenses, like in the case of one Syrian family caught in a situation where they were using most of their income to pay rent for a furnished apartment, which made them unable to save money and buy furniture and move to a less expensive unfurnished apartment (observation made on March 21st, 2016).

4.5.1.2. Residence. Due to the influx of hundreds of thousands of Syrian refugees, there was a scarcity of housing units that led to an increase in rents. Many refugee families had to share housing with each other, especially upon arriving. A refugee described her experience of staying in her husband's brother's two-bedroom apartment, when he arrived from Syria:

When we first came to live with my older brother in law, he was living with his wife and kids. So, we lived with other two families in one apartment, which was very hard. It was only two-bedroom apartment with a small living room, one toilet and a small kitchen [pause] The older brother had a wife and two kids, we had three kids and the youngest brother had a pregnant wife. [pause] 11 persons. Participant 7

Sharing small apartments is a practice that Syrian families sometimes continued to do not just on a temporary basis upon the arrival of a new family, but also as a permanent solution to reduce the cost of rent and utilities. The first author visited many Syrian families' homes and in one case, there was an extended family of ten people who had been living for years in a three bedroom apartment, including their married son and divorced daughter with their own children (observation made on February 7, 2016). Due to the high rents, refugees move to a cheaper apartment whenever possible (especially with little furniture), even if the place is not well maintained or is affected by pollution (e.g., burning garbage and flooded sewers) (multiple observations).

4.5.1.3. *Education.* Basic education (up to 12th grade) is available for Syrian refugees in Jordan free of charge, but challenges facing Syrian students in the Jordanian government schools pushed two participants to consider private school as an option:

Education is expensive in Jordan because government schools do not take care of refugee kids. They go to school in the afternoon and get little attention [pause] I pay 45JODs(\$63) a month for my son's private schools. It is a burden, but I'm handling it. Participant 3

Also, there was the stress of sending children to college; this was an aspect that they did not have to worry abut in Syria, where free college was offered to all citizens:

My older son is 19 years old and finished 10th grade in Syria, but now he cannot go to school because he's working full time. He didn't finish high school because I don't have the money to send him to college.

Participant 2

4.5.1.4. Health. Nine interviewees said that they were satisfied with the health services available to them, especially after they registered with UNHCR. However, three indicated that that health services available to them were basic and even the medical missions and subsidised private health services could not cover some of their serious health needs:

I have serious health issues that the [public] health service did not treat. I need serious medical care, which is expensive. Participant 6 One participant complained about discrimination in providing health care for Syrian refugees in specific health centres, which he believed was sub-standard:

When I get sick I don't go to the doctor. I have no medical insurance. There is a health centre in [location] for refugees. Once I took my friend there and it was very bad. They treated us like cockroaches, not patients [pause] openly, everybody there did. Even if I was dying, I won't go there. Sometimes I have health problems and go to a doctor, who is the mother of a Jordanian friend.

Participant 4

4.5.2. Environmental Stressors

This group of stressors have in common that they arise either from the circumstances of the exile environment (official documentation issues) or a general feeling created by this new environment (instability and lack of familiarity).

4.5.2.1. Official stressors. Some of the Syrian refugees arrived in Jordan through the official borders gates with Syria (closed since April 2015; UNHCR, 2015c; The Jordan Times, 2015), while others arrived through the border fence and then on to refugee camps. Refugees had the option of leaving the camp if they secured a Jordanian guarantor. However, some refugees had their own ways of leaving the camp, as reported by one of the participants:

My family entered Jordan using passports, but that was dangerous for me. So, I entered through the border fence with the help of Free Syrian Army. Jordanians [Jordanian Army] took us to Alzaatri refugee camp, where I left in the same day with smugglers for 70JODs(\$98). Three months later I came back to the camp with a guarantor [to issue official documents]. I did not know him [the guarantor], there were people would arrange it for 50JODs(\$70)

Participant 10

UNHCR registration was important for many refugees because it was a requirement to receive aid and services provided by the government or the NGOs. At the peak of the influx of refugees, the wait for a UNHCR registration interview appointment was months:

The situation went from bad to worse. We were not receiving food coupons, because we had to wait for a UNHCR [registration]appointment due to huge numbers [of refugees]. It was easier for people who came earlier. We arrived in August but had to wait until December to register with UNHCR. Participant 7

It is worth mentioning that UNHCR registration should be renewed annually:

The UNHCR registration has to be renewed every year, while the Jordanian ID [for refugees] does not expire.

Participant 2

Many services require a valid UNHCR registration and one example is a health centre that had signs explaining that blood tests will not be done without a valid (up-to-date) UNHCR registration (observation made on 9th of February 2016).

The UNHCR subsidises the cost of refugees' health care, which could be the reason for asking for a valid UNHCR registration as a requirement to receive health care services: ... let's take health services as an example, Syrian [health care expenses] are paid by the UNHCR while the Jordanian [expenses] are paid by the ministry of health Participant 15 (a local relief worker)

However, being registered with the UNHCR is not the end of the struggle with documentation issues, as the refugees are required to acquire other legal documents. This realisation came to the first author after a short period in Jordan when he was walking with a Syrian student when he asked the first author to avoid passing by a policeman. The first author was puzzled, as he knew that all students in the school were registered with UNHCR, but the other children told him that the student did not have "the ID" (observation made on December 16, 2015). A few months later, the boy's family was deported.

The Jordanian government issued a "security identity card" for Syrian refugees and required them to carry it and show it at official departments and at security checkpoints. The Jordanian security identity card has been updated with a new magnetic one, which contains the refugee's retina scan information. A refugee explains the process and the requirements:

They [Jordanian Government] required us to have the white identity card at first. I gave them my [Syrian] family card and they granted me the white card. Then they asked us to get the magnetic identity card, which requires having the white card. It was a matter of time due to pressure. We also had to do a blood test, which I paid 30JODs(\$42) for, in the [name] hospital last August. I've heard that the price was reduced to 5JODs(\$7). Only adults have to do the test. I took the result to the nearest police station and got the new magnetic security card. They also asked for UNHCR registration and a certified rent lease contract.

Participant 7

Some refugees did not get the new identity card because of the high cost of the blood test, which used to cost 30JOD (\$42) per person before it was subsidised to 5JODs(\$7). However, not holding the new Jordanian identity card can lead to serious consequences, as a participant explains:

In a few months, they would not register my kids in the school, for the next year. You need it to go to health centres and hospitals. If I wanted to travel from Irbid to Amman [the capital] I need it, otherwise I would get into trouble [pause] I would be legally questioned by the police patrol [road block] [...] They might just give you a warning, depend on the police officer [pause] they might throw you in al Azraq camp [more of a detention camp] or let you go. Especially if you talked back, they could throw you back to Syria.

Participant 2

Syrian refugees in Jordan are only allowed to work if they have a working permit(Collier & Betts, 2017). They find it hard to get a permit, and face serious consequences if they have worked without one:

They [refugees] don't have working permit. They cannot have a permit. Anytime they could be caught and deported. Syrian refugees don't get a permit. We tried and it didn't work. Participant 5

A local relief worker noticed an additional reason for Syrians not to get a working permit:

The Syrian refugees try to stay away from getting a working permit because it restricts them to do just one specific job (e.g. builder or sweets maker), while the refugees try to work in more than one job to compensate for the low wage. One day he works in a farm, next day he will work as a builder.

Participant 15

However, Syrian refugees have ways around restrictions on work, as the first author noticed that some refugees chose to work night shifts, outside the working hours of Ministry of Labour inspectors. Other refugees decided to send their children to work (they would not get deported if caught) for shops and restaurants for very low pay (less than \$3/day) - Observation made on May 15th, 2016

4.5.2.2. *New Environment.* Many of the Syrian refugees in Jordan come from the southern region and settle in the northern region of Jordan, due to the proximity (20 kilometres) and similarities in culture. However, Syrian refugees in many cases found themselves in a new environment where they felt disoriented, especially those who came from rural areas and settled in a city:

We did not know the laws, refugee regulations. If I had a sick child, I did not where to go. I have diabetes and high blood pressure and did not know where to get medicine. Participant 10

This new environment creates a lack of familiarity that could have a deep impact on a newly arrived refugee, who feels a deep sense of estrangement and powerlessness:

I was walking back home when I got lost. It was hard to go from one area to another, without knowing where you should go! You take a taxi that asks for 5JODs(\$7), but you don't know if that's too much or not. You don't know the value of the 5JODs, or how long the distance is! Participant 12

4.5.2.3. *Instability.* The participants expressed a deep feeling of instability and loss of aspiration of the future. This is mainly because they consider their stay in Jordan as being temporary, especially when they do not have the option of permanent residence. They felt deep instability that pushed some of them to consider relocating to a third country or even returning to Syria:

The biggest struggle for a refugee is the temporary situation. Where are we going? then what? the instability! Participant 7

Another effect of the exile environment on Syrian refugees was the lost sense of normal life, and one clear example of this lost normality can be found at bedtime. As most refugees are not allowed to work and their children go to schools after the Jordanian students finish school, they seem to adopt a nocturnal lifestyle where the whole family stays up late (multiple observations).

4.5.3. Social Stressors

Although many of the environmental and financial stressors are socially mediated, we labelled this last group of stressors as 'social stressors', because social relations or forms of social interaction (or lack of interaction) are the main source of these stresses.

4.5.3.1. Separation from relatives. The participants belonged to a collectivist culture, so it was not a surprise that they showed great concern for their relatives beyond the borders, in Syria and other countries:

There was suffering [pause] to stay away from my family. [pause] I have a brother in Syria and another brother in Libya. Like the destiny of the Syrian family, we are scattered all over the world.

Participant 3

4.5.3.2. Relations with host-community. Across ten of the interviews, refugees mentioned the word "Jordanians" nine times in a positive context, nine times in a negative context and three times in a neutral context, which may indicate that the relation between Syrian refugees and their Jordanian hosts is a love-hate relationship, were refugees have a mix of negative and positive experiences with locals and local authorities (e.g., Participant 4, who was treated badly at the health centre, but have very supportive Jordanian employer). The general perception of the relationship seemed fine, but there were still everyday indications that Syrians were no longer welcome. One refugee attributed it to the commercial aspect of the crisis:

At first, people were very welcoming to Syrians and treated them very well, but with the increase of influx, things turned to be materialistic. At the beginning, Syrian families were offered housing for free, then turned to rent only. My first landlord even used to bring me breakfast and pick some fruits for me. Participant 9

On level of personal relations, the picture is more positive in that we found reference to many strongly supportive relations:

It was struggling until we managed to know good people. Every community has good and bad people [pause] My Jordanian co-workers are a good example. They visit me and I visit them, which made me no longer feel as a stranger. I have excellent relationships with them, which reduced the struggles I have.

Participant 3

the owner pays all [working permit] fees [pause] He [Jordanian employer] told me not to worry about it, even if it's 600JDs (\$846) [a year], he would pay it [pause] Even if it goes to a 1000JDs (\$1410), he would still pays it. This is hard to find anywhere els.

Participant 4

4.5.3.3. Prejudice. Some participants reported verbal and physical attacks, and while they stressed that these were rare, they felt they were targeted because of their refugee status:

We've been treated somewhat bad. Jordanians do not accept Syrians. They don't treat Syrians well.

Participant 8

However, it seems that some refugees blamed other refugees for such treatment:

They think Syrian women are cheap. Some Syrian women caused this reputation, but it annoys me when they generalise it. Participant 7 *4.5.3.4. Discrimination.* Some interviewees said that they felt welcomed by Jordanians, who treated them well on both personal and official levels. However, they also reported some aspects of discrimination:

At the airport, everybody enters with dignity, except Syrians. They treat him like if he has a bomb in his bag. Participant 1

Some Jordanians apparently held a belief that refugees should have lower status, and they treated them accordingly. The first author witnessed this first-hand while sharing a taxi with a Jordanian, who said during the ride said that Jordan gave a lot to the Syrian refugees who are ungrateful and have a strong voice. He used a traditional proverb "a guest with a sword" to illustrate that the refugees are not at the same level as Jordanians and should behave accordingly (observation made on February 19th, 2016).

4.5.3.5. Exploitation. Some interviewees reported exploitation practices that targeted refugees either by taking advantage of them based on their identity or needs as refugees (e.g., work and housing):

When I want to rent a place I suffer [pause] either they raise the rent or stuff like that. Even a taxi driver when he hears my Syrian dialect asks for more. [pause] Bullying. This does not happens to Jordanians [pause] The salary [for Syrians] is too low compared to other workers, even to the minimum wage set by the government -which was 180JODs(\$253)/month-. They offered me 150JODs(\$211) for working 10 hours. The 180 minimum is for 6 hours! Take it or leave it. Participant 4 There was a restaurant in the neighbourhood where a Syrian worker resigned but did not get paid, and the first author witnessed when a group of Jordanian young men threatening the restaurant's manager to pay the former worker his unpaid salaries. Once they left, the manager called the restaurant's owner and told him that he will "get rid of the worker and send him back to Syria" (observation made on May 16th, 2016).

4.6. Study 2 Discussion

Syrian refugee interviewees reported the issues that they face in exile and that challenge them the most. Occasionally, some refugees reported primary stressors caused by war (like loss of relatives or property back home), but the main challenges were those that they have to face in exile (secondary stressors).

We found three main sources for stressors among the refugees in exile; first, financial stressors where the refugees lost income and found themselves in a relatively expensive host country, which led to poverty and other struggles caused by that poverty (crowded housing, education, and health stressors); second, environmental stressors created by the circumstances of exile (e.g., documentation issues) and the feeling created by this environment (unfamiliarity and instability); third, social stressors where social interactions are the main source of stressors like prejudice, discrimination, and exploitation.

Secondary stressors can be intense and could lead to traumatic experiences, which led some refugees to consider returning to war-ravaged Syria, as in the case of Participant 5 who was struggling for years to provide for his family without any improvement in living conditions, and Participant 14 who was a single mother with three disabled children, with no stable income.

Establishing personal relations with community members, and providing contributions as a teacher and a part-time relief worker helped the first author establish trust for uncensored and safe disclosure during the interviews and casual chats with refugees and

volunteers. The immersion of the researcher in the community for a relatively long time allowed him to make sufficient observations to avoid a superficial and restricted perspective of the community that a passing observer could be exposed to. One example of such a superficial and partial image of the community was experienced by the first author once he arrived in the city. He encountered Syrian boys begging on the main street, while the neighbourhood behind that same street (200m away) included Syrian families, who we found out later had to be convinced to accept aid.

However, our approach had some drawbacks in regard to face-to-face communication, which limited interaction with females due to cultural restrictions with the male first author and also made it harder to discuss sensitive issues like sexual harassment. (One female participant mentioned harassment but did not use the word "sexual" directly and a male participant reported that it happened without discussing specific cases.)

4.7. Study 2

In order to advance our exploration of secondary stressors among Syrian refugees in Jordan, we conducted a questionnaire survey of secondary stressors among a convenience sample of Syrian refugees in Jordan. This study first aimed to get a sense of how common the stressors are that we identified in the previous study; its second objective was to test and validate the themes resulting from qualitative analysis; its third intention was to detect any other stressors that could have been missed by the ethnographic case study (e.g., rare, unobservable or not accessible face-to-face).

4.8. Study 2 Method

Participants. The participants in this study were 305 Syrian adults (18 years and above) who left Syria because of the war and were now living in Jordan. The majority of the participants were male (64.3%).

Building the questionnaire items. The survey items were created using multiple sources, mainly guided by the qualitative data from study 1, and then consulting local experts

(two academics and one relief worker) who worked with Syrian refugees in Jordan. Finally, we drew upon other sources relevant to the refugees' situation (Panter-Brick et al., 2008) or others from different context (Lock et al., 2012). The survey included 51 questions (see Table 4.1), each asking how frequently the respondent was exposed to the secondary stressors (with a 5-point Likert scale, from 'never' to 'always') for all the items, except for seven items (18,38,40,42,44,46 and 48) which expressed the degree to which they agreed with a statement (on a 5-point Likert scale, from 'totally agree' to 'totally disagree'). At the end, the questionnaire included nine demographic questions. The survey questions were translated to Arabic by the first author (who is a native Arabic speaker) and then back translated and checked against the English questions by a research assistant (who was English-Arabic bilingual).

Recruitment and data collection. In September 2016, we used an online survey service (Qualtrics) to construct the survey. We recruited participants using Facebook, based on our knowledge that Syrian refugees are widely using the site to stay connected to their family and friends who were separated due to war, in addition to sharing information about services in exile. Refugees access Facebook using phones, so we designed the online survey to be mobile-friendly. The first author used the social relationships that he built during the ethnography in Jordan with refugees and community organisations to spread the word about the survey, in addition to sending invitations through public Facebook groups dedicated to Syrians in Jordan. We sent link invitations to people with public profiles with the following criteria: adult, Syrian, and living in Jordan.

Analysis. We started with basic descriptives of the sample characteristics, followed by the percentages that show how common the different stressors are among the participants. Finally, we conducted a principal factor analysis (with Varimax rotation) to identify possible groups of stressors that are related to each other and independent from other stressors.

The Sussex University Science and Technology Cross-Schools Research Ethics Committee approved this study on August 2016.

4.9. Study 2 Results

The sample (n = 305) was fairly young (more than 60% < 30 years old) and almost

half of them (47.7%) were single, which could be due to the recruitment method used, whereby Facebook users among the refugee community tend to be younger. Furthermore, it is worth mentioning that the majority of participants (84.8%) spent three years or more in Jordan (due to the closure of the border), which we expected to establish among them a good awareness of secondary stressors of prolonged displacement.

Table 4.1: The percentage of participants experienced secondary stressors in high intensity (4 and 5 on a scale of 5)

	Stressor	%		Stressor	%
1	Losing usual income	%73.9	27	Situations requiring unavailable documents	%16.2
2	Not having enough money to get staple survival foods	%59.8	28	Lack of access to education	%15.6
	Not having enough money for health care (e.g.				
3	medicine/surgery)	%53.6		Process of getting and renew documents	%15
4	High cost of living	%54.6		Lack of responsibility among refugees	%15
5	Being unemployed	%48.1		Feeling unsafe	%14.7
6	Living in poor housing due to 'temporary' situation	%35.1	32	Exploited by locals	%14.7
_	Issues with physical condition of the house (e. g.				
7	maintenance)	%30.3		Not feeling belong to a strong group	%14.2
8	Constant moving between homes	%28.9		Aggressive competition among refugees	%14
9	Not receiving aid or services offered by NGOs	%27.2		Harassment at roadblocks	%13.9
10	Pollution in the area of residence	%26		Let down by refugees	%13.1
11	Lack of recreational activities.	%25.9	37	Lack of water	%13.1
12	Having relatives inside Syria	%25.5	38	Locals tend to take advantage of refugees	%12.3
			•	Lack information about new exile	
	Discriminatory treatment by locals	%25		environment	%12
	Thinking of relocation to a western country	%24.6		Locals are not trust-worthy	%11.6
	Lack of psychological health services	%24.3		Working without a permit	%11.5
	Having refugee' relatives in other countries	%24.1		Locals think refugees are cheaters	%11.4
	Not knowing about aid or services offered by NGOs	%21.4		Insulted by locals	%11.9
	Locals think of refugees as low status	%21.2		Locals think refugees are lacking morality	%9.8
19	Loss of aspirations for the future	%21.2	45	Domestic violence	%9.5
20	Lack of trust in the officials and organisations	%20.1	46	Locals think refugees are not trustworthy	% 9
21	Inability to make future decisions	%19.3	47	Threatened by Locals	%8.9
22	Lack of physical health services	%19.1	48	Locals are not honest	%8.2
23	Threat of deportation or detention (in refugee camps)	%18.2	49	Verbal sexual harassment by refugees	%8.2
24	Not being adapted to life in exile	%18	50	Physical attack by locals	%7.2
25	Poor quality of education	%17.7	51	Physical sexual harassment by refugees	%5.8
26	Conflict among the refugees	%17.7			

In Table 4.1, we find a percentage analysis that highlight the most common stressors that sample of Syrian refugees suffered from in high intensity ("most of the time" and "all of the time"). On the top of the list we find the financial stressors that the majority of refugees suffer from (e.g., 73.9% lost usual income), while the structural environmental stressors appears to affect a large percentage (quarter to third) of the participants. The stressors regarding the relation between The Syrian refugees and the locals were reasonably low (<15%).

Although the previous analysis gives, us a snapshot of the most common stressors among the refugees, it might fail to detect the importance of some highly sensitive social and political stressors (e.g., sexual assault and working without a permit), where refugees might be hesitant to report encountering such stressors. Also, this approach cannot detect some serious (high intensity) stressors (e.g., domestic violence) that only occurs to some refugees, but nevertheless should be highlighted in order to be addressed. To highlight such underlying stressors and explore the relations between the general stressors we conducted an exploratory factor analysis (EFA).

4.9.1. Factor Analysis

A principal factor analysis was conducted on the secondary stressors items with Varimax rotation. The Kaiser-Meyer-Olkin (KMO) measure was 0.73; all KMO values for individual items were greater than .64, which is above the acceptable limit of .5 which indicates an acceptable sample size (Field, 2013).

An initial analysis was run to obtain eigenvalues for each factor in the data; 15 items fall in four factors had eigenvalues greater than 1 and in combination explained 60% of the variance. After rotation, the three factors retained corresponded to four dimensions of secondary stressors. Reliability scores for most factors were acceptable: secondary stressors α = .67; financial stressors α = .86; stressors related to services α = .72; safety stressors α = .72; and relations with locals stressors α = .56

	Factor Loadings						
Items	Financial	Safety	Services	Out-group			
Not enough money for health care	.886						
High cost of living	.854						
Not enough money for food	.803						
Unemployment	.747						
Losing usual income	.647						
Physical attack by locals		.782					
Verbal sexual harassed by locals		.770					
Threatened by locals		.686					
Verbal sexual harassment by refugees		.680					
Not receiving aid or services			.819				
Not knowing about aid and services			.794				
Lack of recreation activities			.760				
Exploited by Locals				.778			
Locals think refugees are not trustworthy				.701			
Locals are not trust-worthy				.670			

Table 4.2: Summary of Exploratory Factor Analysis Results¹

4.10. Study 2 Discussion

As expected, financial stressors were the most common severe stressors among the participants, due to the lack of financial support and restrictions on employment of refugees and expensive life in Jordan. The factor analysis identified four coherent factors. The low reliability of the factor for relations with the locals (Jordanians) factor could be due to the sensitivity of the questions, and thus the responses of some participants. This suggestion is based on observations by the first author during interviews and casual conversations, where most of the Syrian refugees were very careful not to talk in a negative way about Jordanians, to avoid being seen as criticising their hosts. The relation between the Syrians and Jordanian is relatively good, but during casual talks with refugees who were close to the researcher, some of them reported negative encounters with Jordanians that left an impact on them. It is possible that some of the refugees who had negative experiences with Jordanians did not report it in the questionnaires due to two possible factors: first, because of cultural traditions that consider it highly inappropriate to criticise your host; and second, due to the political

¹ The factor analysis might be affected by the fact that some questions had different answer anchors.

status quo where refugees suffer from vulnerability in relation to locals and the government (e.g. stressors 20, 27, 29, 35).

4.11. General Discussion

We found that the qualitative analysis produced three main themes or types of stressors, which were financial, environmental and social, while the quantitative analysis produced four themes or types of stressors, which were financial, services, relation with locals and safety. We identified that the quantitative themes broadly map into the three main types of secondary stressors that resulted from the qualitative analysis. The financial stressors theme was matched in both analyses, services can perhaps be considered as a sub-type of a broader environmental category, and relations with locals and violence can be considered sub-types of the main social stressors category.

Based on the two studies described above, we therefore propose a typology of 33 secondary stressors (Table 4.3) that is organized into three main themes (financial, environmental and social stressors). The selection of these reflects, first, the qualitative analysis that generated the three main themes; second, the factor analysis that generated four factors, which map onto the three qualitative themes; and third the percentage of each stressors among the sample. The scale of fifteen secondary stressors items (Table 4.2) is therefore situated within the typology, with its four sub-scales (financial, services, relations with locals ,and safety stressors).

Financial stressors consistently appeared as a top priority in both the qualitative and quantitative analysis, while there were less frequent – but not less serious – issues that seek our attention (e.g. 5.8% reported physical sexual harassment by another refugee). We had indirect reports (not using the word "sexual" and second-hand experiences) of sexual harassment from two participants during the interviews, but, combined with the fact that 17 participants in the survey reported being sexually harassed, we can conclude that these were not isolated incidents among the refugee community.

Table 4.3: The typology of secondary stressors among Syrian refugees in Jordan

	Stressors	Percentage	EFA	Ethnography	Main Category		
1	Losing usual income	%73.9	Financial	Poverty			
2	High cost of living	%54.6	Financial	Poverty			
3	Not enough money for food	%59.8	Financial	Poverty			
4	Unemployment	%48.1	Financial	Poverty			
5	Not enough money for health care	%53.6	Financial	Health expenses	E'		
6	Living in poor housing due to 'temporary' situation	%35.1		Residence	Financial Stressors		
7	Issues with physical condition of the house	%30.3		Residence			
8	Constant moving between homes	%28.9		Residence			
9	Pollution in the area of residence	%26		Residence			
	Having refugee' relatives in other countries	%24.1		Separation from relatives			
11	Having relatives inside Syria	%25.5		Separation from relatives			
12	Locals think of refugees as low status	%21.2		Discrimination			
13	Discriminatory treatment by locals	%25		Discrimination			
14	Physical sexual harassment by refugees	e i					
15	Physical sexual harassment by refugees%5.8SafetyVerbal sexual harassment by refugees%8.2SafetyPhysical attack by locals%7.2SafetyChreatened by Locals%8.9SafetyLocals think refugees are lacking morality%9.8Locals think refugees are not trustworthy%9Out-Group			Social Stressors			
16			Safety	Prejudice			
17	Threatened by Locals	%8.9	Safety	Prejudice			
	Locals think refugees are lacking morality			Prejudice			
	Locals think refugees are not trustworthy	%9	-	Prejudice			
	Locals are not trust-worthy	%11.6	Out-Group	Prejudice			
21	Exploited by locals	%14.7	Out-Group	Exploitation			
	Loss of aspiration to future	%21.2		Instability			
	Think of relocation to a western country	%24.6		Instability			
24	Not being adapted to life in exile	%18		New environment			
25	Lack information about new exile environment	%12		New environment			
26	Not knowing about aid or services offered by NGOs	%21.4	Services	New environment			
	Lack of recreation activities	%25.9	Services				
	Not receiving aid or services offered by	%27.2	Services	Official stressors	Environmental Stressors		
29	8 NGOs%27.2SerThreat of deportation or detention (in camps)%18.2			Official stressors			
30	Harassment at roadblocks	%13.9		Official stressors			
31	Process of getting and renew documents	%15		Official stressors			
32	Situations requiring unavailable documents	%16.2		Official stressors			
33	Working without a permit	%11.5		Official stressors			

In the typology, we divided the stressors into main themes and then to smaller categories in an attempt to explore the relation between different stressors, but in reality, such division is not pure as overlaps are expected and the nature of a specific stressor can arguably fall under more than one possible category. Our main reason for creating the typology was to identify the main sources of secondary stressors. As we argued in the introduction, by definition secondary stressors arise from the exile environment and thus are environmental in nature, and socially mediated which emphasises the social nature of such stressors; and we acknowledge financial ability to buffer many stressors in situations like forced displacement. However, we focused on the main source making the stressor most salient in the refugee's experience, which is either the structure which forces conditions collectively on refugees (e.g., documentation restrictions/environmental stressors), or social interactions with individuals that spark stress (e.g., exploitation), or the lack of financial ability that determines accessibility to services (e.g., advanced healthcare). Thus, we decided to consider residence, education, and health expenses stressors as financial stressors because these are the "stressors of the poor". We considered worrying about relatives in Syria as a secondary stressor instead of treating it as a primary stressor, directly caused by war, because we believe that the main stress source in this case is the separation itself, not to the dangerous situation that the relatives are experiencing, which we think is also relevant. What gives us confidence that the mere separation from family is the main source of stress is that the participants were found to worry about relatives in Syria (25.4%) to a similar degree that they worry about relatives in other countries (24.1%).

4.11.2. Financial stressors

This type of stressor is the most important, as it was clearly found in both qualitative and quantitative analysis, and the top five stressors common among the participants were all financial (see Table 4.1). This came as no surprise due to the fact that most of the refugees lost their income and homes and depleted their savings during many years in exile, and due to

the high living expenses in Jordan compared to Syria or other neighbouring countries. Two specific financial stressors (poor housing condition and low quality of education) did not group well with the other stressors (maybe because these two result from them), although a considerable number of the survey participants (30% and 17.7%) reported suffering from these stressors.

4.11.3. Environmental stressors

This category included stressors that are circumstantial either in the structure of the exile environment (e.g., services and legal requirements) or relate to a general feeling created by this environment (e.g., instability and lack of familiarity). Most Syrian refugees – especially those who were displaced early in the crises – left their homes as a temporary solution and were not prepared (financially or mentally) for many years in exile with an ongoing civil war without an end in the horizon. This situation is complicated by the fact that Jordan is not a member of the 1951 Refugees Convention, which ensures basic services to refugees (e.g., housing, work, and education) 4 . The Syrian refugees could face these harsh conditions indefinitely as Jordan is very clear in its resistance to refugees being integrated (there are still Palestinian refugee camps in Jordan since 1967). Syrian refugees know that they cannot stay in Jordan or go back home because of war, and relocation to a Western country is not an option for the majority of the refugees because these countries only take a small percentage of refugees 1 and additionally many refugees are not interested in living in a Western country which takes them far from their relatives and traditional culture.

4.11.4. Social stressors

This group of stressors directly arises from social relations, either with locals or other refugees, or the lack of social interaction in the case of separation from relatives. The stressors arising from social interactions in exile were found to be grouped into two types: stressors related to relations with locals and safety stressors.

In the interviews, most of the refugees said that they have good relations with Jordanian people and that they appreciate the efforts and services offered to them in Jordan. However, some refugees reported occasional issues in their relationships with locals (prejudice and exploitation) and more common issues in regard to systematic discrimination against them (e.g., work restrictions, lower quality education and multiple official document requirements). This analysis was supported by the quantitative analysis, which showed that discrimination against Syrian refugee appears to be more common (25% of the participants) compared to experiencing prejudice (less than 15%).

The social violence (safety) group of stressors (physical and verbal sexual assaults) is important, as it represents how the stressors of the exile environment can be traumatic, and at the same time does not have to be common or "daily". This supports our argument for using the term "secondary stressors" to describe these stressors arising from the exile environment instead of "daily stressors" that is widely used in contrast to traumatic stressors.

4.12. Limitations

Both studies reported here were conducted using a convenience sample of adult Syrian refugees in Jordan, and thus we should not assume it is representative of the general population of Syrian refugees in Jordan. Assumptions based on our findings should be examined among larger and more diverse samples of refugees in the Middle East, which will also help to refine the data collection and measurement tools used in both studies. By definition, secondary stressors arise from the exile environment, and thus we predict different secondary stressors among Syrian refugees in other countries, due to the difference in the environment (e.g., the language barrier to Syrian refugees in Turkey). Therefore, we need to extend our examination to include more hosting countries in the region as they have different situations (e.g., financial, security situations and demographics) that could shape the exile into an environment different than what we examined in Jordan.

We recommend more exploration among more refugees in more locations in order to produce more comprehensive and more reliable typology of secondary stressors among refugees of conflict in the Middle East and developing countries in general. Although we laid a foundation to build a scale for secondary stressors in the region, it still needs to be tested it in a wider sample and the items refined.

4.13. Conclusions

As shown in the introduction, the relief literature does recognise the importance of stressors arising from exile, but it lacks an organised conceptual framework to classify these stressors or to measure them. The only effort that we are aware of is a typology of secondary stressors in disasters 18, which was not designed with armed conflicts in mind. We recommend using the term secondary stressors instead of daily stressors, as it includes stressors that are not daily in nature, in addition to traumatic stressors that arise from exile. Our data showed that refugees did occasionally report primary stressors caused by war such as the loss of relatives or property back home, but they clearly emphasised that the main challenges were secondary stressors. Some of the secondary stressors reported by the participant were quite serious and could be considered traumatic (e.g., physical and sexual attacks) which again suggests the flawed use of the term daily stressors, especially when used in contrast with traumatic experiences.

We found that Syrian refugees in Jordan suffer the most from financial stressors, due to the loss of income and high living expenses, and deficiency of the services available to them. Social stressors were found among a considerable number of refugees, where they varied from a group of stressors due to being targeted as a refugee by the locals/government (e.g., discrimination) to more traumatic stressors that came from both locals and other refugees (e.g., assault).

We hope that this typology will offer help to both interventions and future research to identify and classify secondary stressors among refugees of conflicts.

5. Paper 4: The Role of Emergent Shared Social Identity in Psychosocial Support Among Refugees of Conflict in Developing Countries.

 Alfadhli, K., Güler, M., Cakal, H., & Drury, J. (submitted). The Role of Emergent Shared Social Identity in Psychosocial Support Among Refugees of Conflict in Developing Countries. *International Review of Social Psychology*.

5.1. Abstract

In spite of the harsh conditions that refugees of conflicts experience for many years in exile in developing countries, there is evidence showing that refugees of conflict help each other. This study aimed to explore one possible mechanism underlying such support, and sought to answer three main research questions: do refugees share an emergent identity that facilitates support among them (similar to people affected by disasters)? Does this identity-based support impact on their health? If so, does this positive impact help to mitigate the negative effect of exile stressors on refugees' health?

We carried out two questionnaire surveys among Syrian refugees, first in Turkey (n = 234) and then in Jordan (n = 156). The data were analysed using path analysis to test hypotheses and build a theoretical model. We found evidence suggesting a process of shared social identity-based support among the refugees. We found that general health of refugees to be predicted mainly by stress, but we also found that collective efficacy has a positive association with health, which suggests a buffering effect.

These results shed light on the process of social support among refugees of war and suggest the role of shared identity, which can have a buffering effect on the health of the refugees, though not enough to fully mitigate the negative effect of secondary stressors. However, we suggest that such a process can be utilised as base for interventions that approach refugees of war as a group (i.e., at community rather than individual level).

5.2. Introduction

In contrast to the mainstream media image of refugees that present them either languishing in refugee camps or trying to break through European borders by sea, the majority of refugees live in the cities of developing countries. Developing countries constitute the top ten major host countries of refugees (UNHCR, 2016), where in some cases the refugees constitute a large proportion of the total population (e.g., Lebanon 25%) (UNHCR, 2017a), and are expected to live in exile for many years. International emergency interventions may succeed in saving the life of affected populations, but face serious challenges in providing them with livelihoods in exile, for the following reasons. First, the average stay of refugees in a host country is over 20 years (UNHCR, 2016a). Second, there are considerable movement and work restrictions on refugees in developing countries, and some of them are not part of the 1951 Refugee Convention (UNHCR, 2011). Third, the UN Refugee Agency (UNHCR) response budget is seriously under-funded (e.g., it provided less than 25% of the Syrian response budget in Jordan in 2016) (UNHCR, 2017b).

Such immense challenges should drive us to consider again what we know about the refugee situation for a better understanding that hopefully will lead to new solutions for refugees and the host communities. These solutions should utilise the capacities of the affected communities, which can compensate for the lack of resources available for international relief programmes.

One possible example of such capacities is emergent shared social identity among the affected population as a source of collective resilience, something which has already been recognized in some international guidance (NATO, 2008). In a previous paper (Alfadhli & Drury, 2018a), we presented ethnographic and interview evidence suggesting how refugees of conflict from Syria help each other, and the important role of shared identity in facilitating such support. In the present paper we will shed light on the process of the support mechanism and examine quantitatively the paths that lead to the support in two samples of Syrian

refugees. In study 1, we present evidence from a questionnaire survey of Syrian refugees in Turkey (n = 234) that shared social identity is associated with support, in a similar way that was found among people affected by disasters. In study 2, we use an improved design to reexamine the same mechanism in a survey of Syrian refugees in Jordan (n = 156), and then expand the model to include the main challenges refugees face (secondary stressors, and the effect of both stressors and support on the refugees' general health).

5.2.1. Loss of Normal Life

Running away from life-threatening dangers of war is not the end of a refugee's problems, as the prolonged displacement in exile comes with new challenges. On a daily basis, refugees are exposed to secondary stressors (Lock et al., 2012) that arise from their situation as refugees in exile. These are stressors that are socially mediated, rather than arising directly from war (Alfadhli & Drury, 2016). A recent qualitative and quantitative exploration of secondary stressors among Syrian refugees in Jordan (Alfadhli & Drury, 2018b) suggested that these stressors fall into three main groups: first, financial stressors that include poverty, poor residence, education and health expenses; second, environmental stressors including documentation issues, moving into an unfamiliar environment and suffering from instability; third, social stressors that include separation from relatives, prejudice, discrimination and exploitation. These groups of persistent stressors arising from the exile environment are found to have direct and indirect negative effects on the mental health of refugees (Miller & Rasmussen, 2010), in addition to undermining their ability to act (efficacy) (cf. Shumaker & Brownell, 1984; Muldoon et al., 2017).

5.2.2. Refugees as a Group

Usually, refugees do not face these conditions individually; rather they face them collectively as a group, either as a family or a community. The idea that groups can be good for one's health and wellbeing by helping one to deal with stress is an argument associated with the 'social cure' approach in social psychology (Jetten, Haslam, & Haslam, 2012). The

fundamental mechanism for this positive process is identification with the group or social category. Social identity is "that part of an individual's self-concept which derives from his knowledge of his membership of a social group (or groups) together with the emotional significance attached to that membership." (Tajfel, 1974, p. 69).

Research has shown that social identification can have positive effects in a range of health-related contexts, including health-related norms and behaviour, social support, and coping (Haslam, Jetten, Postmes, & Haslam, 2009). One social context where the 'social cure' approach has been relevant, and that appears to have some features in common with the situation of refugees, is that of collective responses to an emergency or disaster (Alfadhli & Drury, 2016). In an emergency or disaster, people may find themselves in the same situation as other people who are affected, with their usual support mechanisms gone. And yet there is evidence that they also often develop new social relationships with the strangers who share the situation with them (e.g., Rodríguez, Trainor, & Quarantelli, 2006). In addition to the importance of a common situation, it seems that sharing distress in such situations can also be a driving force to identify with others (Vezzali, Drury, Versari, & Cadesamuro, 2016).

Analysis of interview accounts from survivors from a range of emergencies found that the common fate of the emergency was associated with a new shared identity with other survivors which in turn motivated people to provide much-needed social support to each other (Drury, Cocking, & Reicher, 2009b). A large-scale survey of survivors of the Chile earthquake of 2010 was able to examine and quantify the psychological mechanisms underlying these kinds of examples of emergent solidarity (Drury et al., 2016). The study suggested that shared identity with others affected by the disaster had a number of significant effects. A crucial mechanism seemed to be the development of expected support. Shared social identity predicted expected support which in turn predicted collective efficacy; this suggests that people felt more able to cope because they felt others in the wider social category would be supportive. Shared identity also predicted participation in coordinated

support, suggesting that people were more likely to engage in shared activities to help the whole community of survivors if they identified with the survivor category, and the mediating mechanism for this was again expected support.

Based on the ethnographic research and similarities to the disaster context, we suggest that a similar process of support based on an emergent "refugee" shared identity may be functional among refugees of conflict. Refugees of conflict – similar to people affected by disasters - suffer from major events that create mass injuries and collateral loss of possessions, and where the survivors try to cope with secondary stressors in a protracted aftermath.

5.2.3. Aim of the paper

The Syrian conflict is the major contributor of the current crises. During the last six years it produced 6.5 million internally displaced people and five million refugees, most of them living in neighbouring countries (Lebanon, Jordan, Turkey, and Iraq) (UNHCR, 2017b). The present study therefore focuses on Syrian refugees and seeks to explore to what extent the social identity model of collective resilience in emergencies can be adapted to explain the dynamics of social support among Syrian refugees in neighbouring countries. We expect this model to explain the process of support based on identifying with other refugees. Based on what we know about conditions of these refugees, we can say that they are treated as a group of "refugees", especially in urban contexts due to the contrast with locals (compared to "all refugees" in the camp environment) and the daily reminders of refugee status (e.g., food coupons, refugee IDs and official restrictions) (Alfadhli & Drury, 2018b). Such challenges prolonged for years are expected to highlight their common identity as "refugees", which could be a valuable resource to a group that does not have much. However, we also acknowledge that there are alternative sources of social support available to refugees in exile, other than shared social identity (e.g., pre-existing social networks), which would be expected to explain some of the variance in the measures of support.

We arrived at three main research questions: do refugees share an emergent (refugee) identity that facilitates support among them, similar to people affected by disasters? Does this identity-based support have a positive impact on their general health? If so, does this positive impact help to encounter the negative effect of exile stressors on the refugees' general health? We sought to answer these questions through two surveys among Syrian refugees in Turkey (n = 234) and Jordan (n = 156).

5.3. Study 1

According to the UNHCR, there are 3,222,000 Syrian refugees in Turkey who have been steadily arriving since the armed conflict in February 2012 (UNHCR, 2017b). Most of theses refugees are experiencing a prolonged displacement as the civil war is still raging in Syria and the resettlement efforts are targeting less than 1% a year of the refugee population. In this protracted challenging situation, we suggest that urban refugees stranded together and singled out due to their legal and financial situation will develop a new shared identity as refugees, even if they come from different Syrian backgrounds (e.g., regions, tribes, religious sects). Social support based on shared identity can be a valuable resource to the refugees in Turkey, especially in face of serious mental health challenges that they experience (Karaman & Ricard, 2016).

Therefore, we expected to find a negative effect of secondary stressors on general health (H1), though we also predicted that high exposure to secondary stressors would be associated with higher identification with other refugees (H2). We predicted that higher identification with other refugees would be associated with an increase in providing practical support (H4), coordinated support to other refugees and sense of collective efficacy (H5). We expected the last two effects to be mediated by expected support (H3). We predicted that collective efficacy, providing practical support, and engaging in collective support activities to have positive associations with the health of refugees (H6).

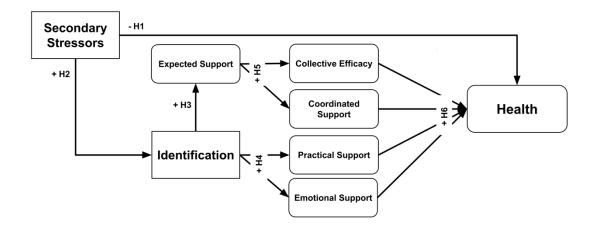


Figure 5.1: Summary of main hypotheses of Study 1

5.3.1. Study 1 Method

Recruitment started on November 2015 by the second author who worked with Syrian refugees in Mersin, a Turkish city near the Syrian borders. The researcher invited participants who met the inclusion criterion (18 years or older Syrian refugee who lives in Turkey) to answer an anonymous paper survey (in the language of the refugees, Arabic). Participation was voluntary and we did not offer any compensation to participants.

Two hundred and thirty-four participants completed the survey, which is an adequate sample size according to the path analysis guidelines that recommend a minimum sample of 50 (Iacobucci, 2010) or 10 cases for each variable (Nunnally, 1967). Participants' mean age was 33.5 years (SD = 12 years); 58% of them were male; only 7% of the participants spent three years or more in Turkey, while 35% of them spent one year or less.

Ethics statement. University of Çukurova research ethics committee approved this study on October 2015.

5.3.2. Measures

Participants were asked to report on a number of topics based on their own experience during the previous month. All scales were translated into Arabic, the native language of the first author, and then back-translated by a bilingual research assistant and checked against the original items to assure the accuracy of the translation. Some modifications of existing items were made to fit the context of refugees of conflict.

5.3.2.1. Shared social identity. We used a four-item scale based on Doosje, Branscombe, Spears, and Manstead (1998) and Doosje, Ellemers, and Spears (1995), to assess the extent of participants' identification with other Syrian refugees: "I felt at one with the refugees around me", "I identified with the other refugees", "I felt unity with other refugees" and "I felt that other refugees were like me" ($\alpha = .80$). Response options were 1 "Strongly disagree" to 7 "Strongly agree".

5.3.2.2. Expected support. We used a three-item scale based on Drury et al. (2016), to assess the extent of which participants expect support from other refugees: "I came to expect other refugees to be cooperative", "It became the norm for other refugees to be supportive of my actions" and "Other refugees will give help if I ask for it" ($\alpha = .80$). Response options were 1 "Strongly disagree" to 7 "Strongly agree".

5.3.2.3. Collective efficacy. We used a three-item scale based on Bandura (1995) and Drury et al. (2016), to assess the extent of which participants believe that their refugee group was capable of dealing with the challenges: "We felt capable of accessing services we needed", "We felt we were able to organize ourselves to improve our situation" and "We felt somewhat in control of things, despite being refugees" ($\alpha = .67$). Response options were 1 "Strongly disagree" to 7 "Strongly agree".

5.3.2.4. Coordinated support. We used a five-item scale based on Drury et al. (2016), to assess the frequency of which participants provided support in coordination with other refugees: "I participated in groups that organized to locate supplies etc.", "I worked together with other refugees for the good of others", "I acted together with other refugees to improve our conditions", "I participated with others in helping other refugees to move" and "I joined in contributing to funds help with funerals and/or weddings" ($\alpha = .79$). Response options were 1 "Never" to 5 "A lot".

5.3.2.5. Emotional support. We used a three-item scale based on Drury et al. (2016), to assess the frequency of which participants provided emotional support to other refugees: "I gave emotional support" and "I showed concern for others' needs" (reliability = .80). Response options were 1 "Never" to 5 "A lot".

5.3.2.6. Practical support. We used a three-item scale, to assess the frequency with which participants provided support in a practical manner to other refugees: "I shared some of my things with other refugees", "I helped new refugees by giving them information" and "I gave other refugees advice about services" ($\alpha = .79$). Response options were 1 "Never" to 5 "A lot".

5.3.2.7. General health. To measure general health, we used five items from the General Health Questionnaire (Minowa, 2003) as adapted in Eller, Cakal, and Sirlopu (2016). The scale included the following items: "Have you been very anxious and nervous", "Have you felt so down in the dumps that nothing could cheer you up", "Have you felt calm and peaceful", "Have you been happy" and "Have you felt downhearted and blue" ($\alpha = .62$). Response options were 1 "Not at all" to 5 "Often".

5.3.2.8. Secondary stressors. To measure secondary stressors, we used the 26-item Afghan Daily Stressors scale (Panter-Brick, Eggerman, Mojadidi, & McDade, 2008), which included a wide spectrum of stressors that arise from exile environment (e.g., "Not being able to find work", "Roadblocks", "Feeling lonely"). Response options were 1 "Not at all stressful" to 3 "Very stressful".

5.3.3. Study 1 Results

Table 5.1 shows that shared social identity correlated significantly with all variables, but notably more with expected support, collective efficacy, practical support and coordinated support. General health was correlated with only expected support and collective efficacy. Coordinated support was found to highly correlate with practical support and emotional support, although the latter two barely had a significant correlation. The analysis showed that the stressors scale (the Afghan Daily Stressors Scale) was not usable for the purpose of the

study; although the scale scored a reasonable overall reliability score ($\alpha = .69$), it did not show a good structure in the factor analysis nor a good model fit in the path analysis, and so was dropped from the analysis. The issues might be due to differences in the Afghan context than the Syrian exile in Middle East or due to issues of translation to Arabic. The emotional support scale was also dropped from the analysis to improve the fit of path-analysis model, which is better without the emotional support.

	Min Max	М	SD	1	2	3	4	5	6	7
1. Collective efficacy	1/7	4.58	1.83							
2. Expected support	1/7	4.56	1.96	.267***						
3. Practical support	1/5	3.40	1.18	.197**	.072					
4. Shared social Identity	1/5	2.22	0.99	.201**	.582***	.167*				
5. Coordinated support	1/5	3.14	0.66	.110	.129*	.560***	.193**			
6. Emotional support	1/7	5.01	1.56	.093	.124	.608***	.212**	.434***		
7. General health	1/5	3.45	1.20	.205**	.094	.079	.100	.112	.006	
8. Secondary Stressors	1/3	1.90	0.38	020	.074	.141*	.058	.095	.175**	.090

Table 5.1: Descriptive statistics and correlations

p* < .05, *p* < .01, ****p* < .001

5.3.4. Path analysis

After making sure that all standardised factor loadings achieved satisfactory levels of above .50 (Kline, 2011), we conducted path analysis of the survey data with 5000 Bootstrapping to build a theoretical model and tried a number of models. The model based on our own predictions had very good fit on all criteria (Figure 2) and demonstrated an excellent fit to the data ($\chi^2 = 9.91$, p = .19, df = 7, CFI = .98, RMSEA = .042, SRMR = .040; good fit is indicated by non-significant χ^2 / df ratio lower than or equal to 3; 06 or lower for RMSEA; .95 or higher for CFI; and .08 or lower for SRMR; see Bentler, 2007; Hu & Bentler, 1999).

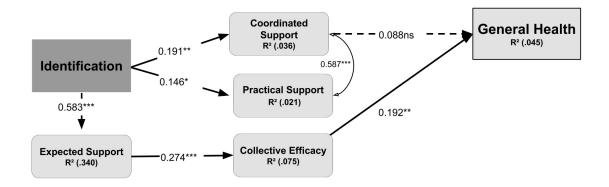


Figure 5.2: Standardised results of path analysis using multiple regression analyses

In line with expectations, identification with other refugees significantly predicted expected support ($\beta = .52$, SE = .07, p < .001), participation in coordinated support ($\beta = .19$, SE = .07, p = .011) and providing practical support ($\beta = .14$, SE = .07, p = .035). Expected support predicted collective efficacy ($\beta = .27$, SE = .06, p < .001) which in turn predicted general health ($\beta = .19$, SE = .06, p = .004). Coordinated support had a weak and nonsignificant effect on general health ($\beta = .08$, SE = .06, p = 0.16). We predicted that expected supported to be a mediator of identification effect on coordinated support, but it was not.

We found a significant indirect effect of shared social identity on general health mediated by both expected support and collective efficacy, $\beta = .031$, 95% CI [.011, .060]. Shared social identity also had a significant indirect effect on collective efficacy, mediated by expected support, $\beta = .159$, 95% CI [.096, .232].

5.3.5. Study 1 Discussion

Apart from not being able to test the hypothesis related to the stressors, most of our predictions regarding the support process and its relation to the refugees' health were supported and the model displayed very good fit. This suggests that, in Turkey, Syrian refugees' identification with each other can contribute to health outcomes – an important finding given the stressors they face and the limited resources at their disposal. The analysis suggested that the same pathways and relationships found in the case of disasters (Drury et

al., 2016) were found here. In particular, the perception that other refugees would be supportive as a function of identification with them plays a pivotal role. In addition, the more that refugees identified with each other, the more likely they were to provide practical support to each other and participate in coordinated activities for the good of the whole refugee community. Expected support was associated with increases in refugees' sense of efficacy – their belief that they can act and achieve things. This sense of efficacy, as well as participation in coordinated support activities, was associated with increased general health (cf. Shumaker & Brownell, 1984; Muldoon et al., 2017).

As part of the study, we also examined the refugees' perception of secondary stressors. However, on closer inspection, we concluded that the items in this measure were problematic and therefore the measure was excluded from analysis. Ideally we would want to show how the social identity processes identified in the present analysis moderate (i.e., reduce) the effect of secondary stressors on efficacy and general health. However, to do this, we would need to develop an appropriate (valid, reliable) measure for this population, which is what we sought to do in study 2.

The present study contributes to the existing literature in two ways. First, as described, it suggests that we can apply similar social-psychological concepts established in the disaster literature to the situation of refugees from war in developing countries. Second, it also goes beyond the disaster literature by including a measure of general health, and finding evidence that social identity processes impact positively on general health. In this way, the study expands the scope of the 'social cure' (Jetten et al., 2012) approach by showing how it applies to refugees.

To address some of the limitations of this study, we decided to improve the measurements and add new ones and use a more focused recruitment process, for a new study to collect more data from Syrian refugees in Jordan.

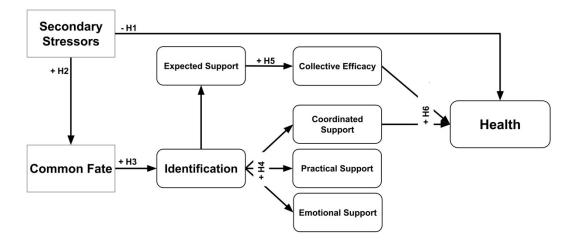
5.4. Study 2

Jordan is a clear example of a developing host country where the refugees are a substantial part of the total population of 7.5 million, including 656,170 Syrian refugees who fled the armed conflict in their country since 2012 (UNHCR, 2017b), in addition to 2,117,361 Palestinian refugees in Jordan since 1967 and before (UNRWA, 2017). Though a third of the population are registered refugees (or asylum seekers), Jordan is not part of the 1951 Refugee Convention (UNHCR, 2011) and resists integration of refugees, as there are still Palestinian refugee camps (urban areas now) in Jordan from 1967. The movement of refugees to Jordan across the northern border with Syria stopped officially in April 2015 (The Jordan Times, 2015; UNHCR, 2015c), which makes most Syrian refugees in Jordan familiar with the situation in their host country, due to their long stay.

Study 1 suggested evidence that a support process based on shared social identity does exist among refugees, which was linked to their general health. We failed to get a sense of how this support mechanism behaved in the context of the stressors facing refugees, due to using an unsuitable measure of secondary stressors. In study 2, we introduce a secondary stressors scale that we developed in a separate study of Syrian refugees in Jordan (Alfadhli & Drury, 2018b). We also employ new scales to measure stress and depression as additional health outcomes, and we included a common fate scale as a possible source of identification among refugees.

We expected to find a negative effect of secondary stressors on general health (H1). We also predicted that high exposure to secondary stressors could lead to higher sense of common fate with other refugees (H2). We predicted that identification with other refugees to be associated with the sense of common fate (H3) and to predict providing support to other refugees (H4) and collective efficacy (H5), which would be mediated by expected support.

We predicted that general health would have a positive association with both collective efficacy and being engaged in collective support activities (H6).





5.4.1. Study 2 Method

Sample and recruitment. Based on our experience working with Syrian refugees, we found that many of them use social media (Facebook and WhatsApp) actively to stay connected to family and friends scattered in exile. Hence, we recruited participants through snowballing on Facebook. Although the recruitment was online, the process involved considerable engagement between the researcher and each potential participant through direct and interactive communication through all stages of the process (personal invitation, filling the survey and after). We started inviting possible participants – one by one - in February 2017 and for six weeks using the first author's own friends' list of Syrian refugees and Facebook groups dedicated to Syrian refugees in Jordan. Invitations were sent to members of these groups who met the inclusion criterion (18 years or older, Syrian hometown, and living in Jordan). The invitations were sent from a public Facebook profile of the first author as a direct message to the potential participant introducing himself and including the purpose of the study with a link to the online survey that contained further details about the study and the process of the survey. As a compensation of their time, participants were offered a mobile

phone credit equivalent to £3.50. The first author was available online to answer any questions from the possible participants, some who had questions about the researchers' identity and the purpose of the study or needed further clarifications about how to answer the questions.

Two-hundred and ninety-six personal invitations were sent and 166 participants completed the online survey; 10 responses were excluded due to low engagement (very short survey completion time < 4 minuets). Participants' mean age was 30.4 years (SD = 8.8 years); 63.9% of them were male; 84.5% of the participants had spent four years or more in Jordan. The sample size (n = 156) is adequate according to the path analysis guidelines that recommend a minimum sample of 50 (Iacobucci, 2010) or 10 cases for each variable (Nunnally, 1967).

Ethics statement. The University of Sussex Ethics Committee approved this study in February 2017.

5.4.2. Measures

We introduced a number of measurement improvements based on the previous study that included: refinement of the same measures used (i.e., rephrasing some questions and the answer anchor, adapting a five-point Likert scale for all the measures); substituting the 5items short version of general health measure with the full 12-items general health scale (12items); and use of a secondary stressors scale we developed for Syrian refugees in the Middle East (Alfadhli & Drury, 2018b), that measures the exposure to the stressors instead of the extent of stress caused by these stressors (e.g., Panter-Brick et al., 2008).

We adopted six scales from the previous study; shared social identity ($\alpha = .84$), expected support ($\alpha = .65$), coordinated support ($\alpha = .83$), practical support ($\alpha = .76$), collective efficacy ($\alpha = .65$), emotional support ($\alpha = .68$) after adding to it a third item "showed respect to others". 5.4.2.1. Common fate. We used a scale of four items adapted from Drury et al. (2016) to assess the extent of which the participant believed that the refugees around him shared a sense of common fate in relation to the situation of being a refugee: "Refugees are all in a similar situation", "All refugees face same challenges and problems", "All refugees feel similar suffering" and "All refugees face similar challenges during adapting" ($\alpha = .85$). Response options were 0 "Strongly disagree" to 4 "Strongly agree".

5.4.2.2. Secondary stressors. We used seven items from a scale we established previously on the same population (Alfadhli & Drury, 2018b) to assess the extent of participants' exposure to some of the main secondary stressors related to financial challenges, services, and relations with locals: "High cost of living", "Being unemployed", "Not having enough money to get stable survival foods", "Not knowing about aid or services offered by nonprofit organizations", "Lack of recreational activities", "Jordanian people try to take advantage of others", "Jordanian people are trustworthy" (reversed), and "Jordanians think that Syrians are not trustworthy" ($\alpha = .63$). Response options for the questions about financial and services were 0 "Never" to 4 "All the time", and response options to questions about relation with locals were 0 "Strongly disagree" to 4 "Strongly agree".

5.4.2.3. General health. We used the twelve-item GHQ scale (Minowa, 2003), which was translated by the first author and back-translated and checked by a research assistant. The scale included items like "Lost much sleep over worry", "Been thinking of yourself as worthless" and "Felt constantly under strain" ($\alpha = .76$). Response options were 0 "Never" to 4 "Very often".

5.4.2.4. Stress. We used the ten-item Arabic version of Perceived Stress Scale (PSS-10) (Chaaya, Osman, Naassan, & Mahfoud, 2010). The scale included items like "felt that things were going your way", "found that you could not cope with all the things that you had to do" and "felt nervous and stressed" ($\alpha = .81$). Response options were 0 "Never" to 4 "Most of the time".

5.4.3. Study 2 Results

	Min Max	М	SD	1	2	3	4	5	6	7	8	9	10
1.Shared Identity	0/4	2.41	1.01										
2.Expected Support	0/4	2.02	0.90	.609**									
3.Collective Efficacy	0/4	1.82	0.78	.381***	.392***								
4.Practical Support	0/4	1.83	1.22	.313***	.137	.116							
5.Coordinated sup.	0/4	1.24	1.03	.298***	.233**	.105	.591***						
6.General Health	0/4	2.11	0.66	.152	.156	.234**	.098	.187*					
7.Stress	0/4	2.09	0.60	068	066	117	086	182*	570***				
8.Common Fate	0/4	2.16	1.06	.418***	.419***	.069	.167*	.235**	042	.13			
9.Secondary Stressors	0/4	1.98	0.73	.088	.032	024	013	275**	09	.280***	.085		
10.Emotional support	0/4	2.89	1.00	.288***	.212**	.271**	.404***	.298***	.166*	043	.068	.230**	
11.Time in Exile	1/5	4.12	0.83	.057	046	089	.116	.068	.058	.082	.137	.163*	320***

Table 5.2: Descriptive statistics and correlations of study 2

*p < .05, **p < .01, ***p < .001.

5.4.3.1. Predictions. As expected in H1, the analysis showed a negative relation between the exposure to secondary stressors and health, which is mediated by stress. We could not find a significant relation between the exposure to secondary stressors and common fate as predicted in H2 but when accounted for time spent in exile, the interaction showed that high exposure to secondary stressors leads to a sense of common fate among refugees who spent longer time in exile, which could support the emergent shared social identity narrative. Regarding the social support process, shared social identity was predicted by the sense of common fate H3; shared social identity predicted providing practical and coordinated support H4; shared social identity also predicted collective efficacy, with expected support as a mediator.

In regard to the impact on general health H5, we found a positive relation between the sense of collective efficacy and general health. Engaging in coordinated support to other

refugees also have a positive association with general health, but such effects diminish in high exposure to secondary stressors.

In order to test the buffering hypothesis in detail, we tried to isolate the contribution of the support process to the general health of refugees by conducting the path analysis on the theoretical model twice to compare the full model (Figure 5) with the model without the secondary stressors / stress path (Figure 4). The comparison showed that the support process does contribute to the health of refugees but not enough to encounter the - around three times greater - negative effect of stress.

5.4.3.2. Path analysis. We conducted path analysis of the survey data with maximum likelihood estimate to build a theoretical model of support processes (Figure 4). The model demonstrated an excellent fit to the data ($\chi^2 = 11.51$, p = .319, df = 10, CFI = .99, RMSEA = .031, SRMR = .038; good fit is indicated by non-significant χ^2 / df ratio lower than or equal to 3; 06 or lower for RMSEA; .95 or higher for CFI; and .08 or lower for SRMR; see Bentler, 2007; Hu & Bentler, 1999).

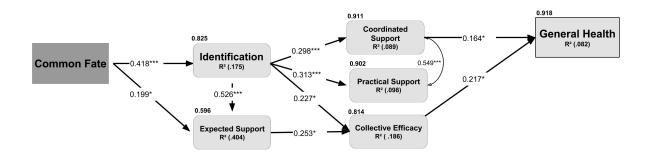


Figure 5.4: Standardised results of path analysis using multiple regression analyses

5.4.3.3. The support process. Common fate was found to be a strong predictor of shared social identity ($\beta = .39$, SE = .08, p < .001), which in turn was a strong predictor of both practical support ($\beta = .37$, SE = .09, p < .001) and coordinated support ($\beta = .30$, SE = .07, p < .001). Expected support was found to be predicted by shared social identity ($\beta = .52$, SE = .07, p < .001) in addition to common fate ($\beta = .19$, SE = .08, p = .015). Collective

efficacy was found to be predicted by shared social identity ($\beta = .22$, SE = .11, p = .039). Finally, health among the refugees found to be predicted by collective efficacy ($\beta = .21$, SE = .09, p = .021), in addition to engaging in collective support efforts ($\beta = .16$, SE = .08, p = .045).

We found significant indirect effects from common fate on general health. One path was mediated by shared social identity and collective efficacy $\beta = .021, 95\%$ CI [.006, .054]. Another indirect path was mediated by shared identity and collective efficacy $\beta = .020, 95\%$ CI [.004, .050].

5.4.3.4. *Full model.* To explore any possible positive effect of the previous support process on the general health of the refugees and compare it to the negative effect of secondary stressor, we built a full model (Figure 5) in attempt to capture a glimpse of refugees' reality where the support process does not work in a vacuum.

The model demonstrated an excellent fit to the data ($\chi^2 = 21.195$, p = .44, df = 21, CFI = .99, RMSEA = .008, SRMR = .051; good fit is indicated by non-significant χ^2 / df ratio lower than or equal to 3; 06 or lower for RMSEA; .95 or higher for CFI; and .08 or lower for SRMR; see Bentler, 2007; Hu & Bentler, 1999).

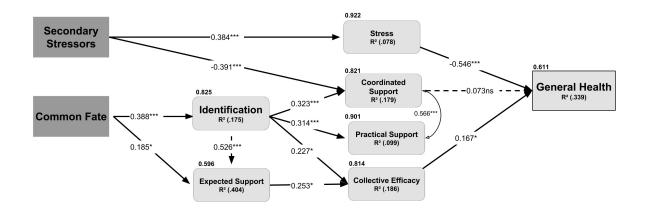


Figure 5.5: Theoretical model of the process of shared identity-based support among the refugees and its effect on their general health, in the presence of secondary stressors (Full model)

The results showed a strong negative effect of secondary stressors on refugees' general health, mediated by stress. Compared to the last model, this model (Figure 5) have three new regressions, where secondary stressors predicted stress ($\beta = .28$, SE = .0, p < .01) and coordinated support ($\beta = -.28$, SE = .05, p < .001), in addition to stress predicting general health ($\beta = -.54$, SE = .05, p < .001).

Focusing on general health, we can see it has a negative association with stress three times stronger than its positive association with collective efficacy. From comparing the R^2 for the general health between the two models (Figures 4 and 5) we see that stress contributes to at least three-quarters of the variance in general health. This result support that there is a buffering effect by collective efficacy against the stronger negative effect of stress on general health.

In addition to comparing the positive and negative relations with general health and the change of R² between the models, we can notice that secondary stressors seems to have a double effect on general health. From comparing the two models (Figures 4 and 5), it seems that the secondary stressors weaken the positive associations between coordinated support and general health, in addition to having an indirect effect on general health mediated by the stress. The full model (Figure 5) shows that high exposure to secondary stressors is associated with a significant decrease in engagement in coordinated support, which could be responsible for diminishing the positive association between coordinated support and general health, from ($\beta = .16$, SE = .08, p = .045) to ($\beta = .07$, SE = .06, p = .28). We also notice that the presence of secondary stressors and stress decreases the positive association between collective efficacy and general health, from ($\beta = .21$, SE = .09, p = .021) to ($\beta = .16$, SE = .07, p = .025).

5.4.3.5. Indirect effects.

 Table 5.3: Indirect specific effects

					β	95 % CI
Secondary Stressors \rightarrow			Stress →	General health		231,076
Secondary Stressors \rightarrow			Coordinated support \rightarrow	General health	021	055, .010
Common Fate →	Shared Social Identity \rightarrow		Collective efficacy \rightarrow	General health	.015	.004, .043
Common Fate →		Expected Support \rightarrow	Collective efficacy \rightarrow	General health	.009	.001, .03
Common Fate →	Shared Social Identity \rightarrow		Coordinated support \rightarrow	General health	.010	003, .031
Common Fate →	Shared Social Identity \rightarrow	Expected Support \rightarrow	Collective efficacy \rightarrow	General health	.010	.002, .029
	Shared Social Identity \rightarrow		Collective efficacy \rightarrow	General health	.037	.007, .094
	Shared Social Identity \rightarrow		Coordinated support \rightarrow	General health	.024	009, .068
	Shared Social Identity \rightarrow	Expected Support \rightarrow	Collective efficacy \rightarrow	General health	.023	.003, .065
		Expected Support →	Collective efficacy \rightarrow	General health	.044	.006, .115
Common Fate →	Shared Social Identity \rightarrow		Collective efficacy		.092	.026, .187
Common Fate →		Expected Support \rightarrow	Collective efficacy		.052	.013, .120
Common Fate →	Shared Social Identity \rightarrow	Expected Support \rightarrow	Collective efficacy		.058	.019, .116
Common Fate →	Shared Social Identity \rightarrow		Coordinated support		.135	.073, .214
Common Fate →	Shared Social Identity \rightarrow		Practical support		.131	.072, .213
Common Fate →	Shared Social Identity \rightarrow	Expected support			.220	.146, .311
	Shared Social Identity \rightarrow	Expected Support \rightarrow	Collective efficacy		.138	.043, .252

Note. Bootstrap is based on 5000 re-samples. When confidence intervals do not include zero this shows that there is a significant indirect effect (Preacher & Hayes, 2008; Williams & MacKinnon, 2008). Standardized coefficients are shown.

The analysis of indirect effects (Table 5.3) confirmed the suitability of the support process paths in the full model (Figure 5), especially the paths from common fate and shared social identity to general health through collective efficacy as a distal mediator. Also, the indirect effect of secondary stressors on health through stress was significant β = -.153, 95% CI [-.231, -.076].

We found significant indirect paths from common fate to general health; the strongest path involved shared social identity then collective efficacy as mediators $\beta = .015$, 95% CI [.004, .043]; a second path involved shared social identity, expected support and collective efficacy as mediators $\beta = .010$, 95% CI [.002, .029]; the last path involved expected support and collective efficacy as mediators $\beta = .009$, 95% CI [.001, .030].

Indirect paths from shared social identity to general health of the refugees had higher effects; the first path was mediated by collective efficacy $\beta = .037, 95\%$ CI [.007, .094]; the second path involved expected support and collective efficacy as mediators $\beta = .023, 95\%$ CI [.003, .065].

5.4.3.6. Moderation Analysis. As mentioned in the introduction, one difference from a disaster setting is that conditions of the exile environment poses considerable challenges in the face of refugees having a 'normal life'. Based on that, we anticipated that the secondary stressors to contribute toward the sense of common fate among the refugees. But the results showed that secondary stressors did not significantly predict sense of common fate among the participants ($\beta = .126$, SE = .13, p = .287). However, we did find that time spent in exile to moderate this relation (Figure 6) ($\beta = .473$, SE = .13, p < .001), (Δ R2 = .07, F(5.139) = 151, p < .001), whereby refugees who spent more time in exile showed higher levels of sense of common fate in the presence of secondary stressors than those who had been refugees for less time.

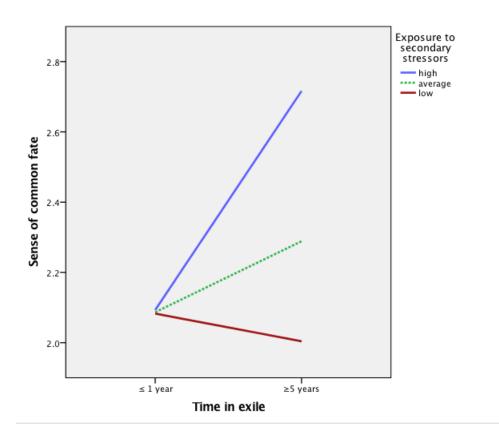


Figure 5.6: Interaction between time spent in exile, sense of common fate, and exposure to secondary stressors

5.4.4. Study 2 Discussion

The results support the idea that a shared identity-based support process among the refugees that has a positive association with their general health, as found in the previous study. In addition, this study showed that secondary stressors are associated with stress, which was found to have a negative association with the general health of refugees. Secondary stressors were also found to have a negative association with coordinated support, which implies that high exposure of secondary stressors might hinder the possibility of refugees engaging in coordinated support activities.

Although this study showed that the main variables had similar relations to that found in the case of earthquake (Drury et al., 2016), this study showed a slightly different pattern of mediations. First, we found that expected support is predicted by common fate in addition to be mainly predicted by identification, which could be due to the stigmatic nature of the "refugee" identity which might reduce its role as a mediator. Second, coordinated support is predicted by shared social identity, but not through expected support, which could be due to the prolonged displacement of refugees that reduces the sense of emergency and the expectations of collective response, or a shift toward tasks that require less cooperation. The significance of such variations will be discussed in the following general discussion section.

The indirect paths analysis showed multiple paths of effects from common fate and shared social identity to the general health of refugees, which gives some support to the hypothesis that the identity-based support process has a positive effect on the general health of the refugees.

We predicted that high exposure to secondary stressors would be associated with common fate (and thus to identification with other refugees). However, we found no significant direct relation between the two variables, but found that time spent in exile increased the chance of exposure to secondary stressors (arising from the exile environment) being associated with a greater sense of common fate with other refugees (Figure 5.6). This result is important for two reasons. First, it is in line with the idea of the emergent nature of shared social identity (based on common fate), by showing a rise in the sense of common fate after displacement. Second, mere displacement and being in exile is not enough to develop a sense of common fate among the refugees rather than their experience with exile stressors, as those who were exposed to fewer stressors showed less common fate with other refugees after ~ five years than after one year. We argue that this result could support the hypothesis of emergent shared social identity, as the refugee identity is a new identity that displaced people acquire in exile and the more they get exposed to stressors of the exile environment – many of which targets them *as a group* - the more they identify with other refugees who share the same situation with them.

5.5. General Discussion

Addressing the first main research question "do refugees share an emergent identity that facilitates support among them (similar to people affected by disasters)?", the findings of

the two studies with two populations of Syrian refugees in different countries is an evidence of core process of shared identity-based support. This identification with other refugees predicts providing support of different types, expected support, and collective efficacy, similar to what has been found among populations affected by disasters.

Regard the second and third research questions "Does this identity-based support impact on their health? If so, does this positive impact help to mitigate the negative effect of exile stressors on refugees' health?", we found that this core process is linked to a sense of collective efficacy and has a positive relationship with the general health of the refugees, which seems to buffer the negative effect of secondary stressors (mediated by stress).

In addition, we found a further indication that supports the emergent identity hypothesis, were the participants who spent more time in exile seems to have a higher sense of common fate and identification with other refugees.

5.5.1. Identity-Based Support

The results of both studies showed a pattern of social identity-based support mechanism among the refugees of conflict similar to what was found in case of disasters and mass emergencies (Drury et al., 2016). In line with that study, common fate predicted shared social identity, which in turn was a strong predictor of many functions of social support and collective efficacy. Our analysis showed that the shared identity-based support process have a relationship with the general health of refugees through increased sense of collective efficacy, and engagement in providing collective support to other refugees.

In line with previous literature (e.g., McNamara, Stevenson, & Muldoon, 2013), both of our studies showed evidence that shared identity-based support process to have a positive impact on the general health through a sense of collective efficacy.

5.5.2. The buffering effect

The previous literature has established the negative effect of the secondary stressors on mental health and general health of the refugees (Miller & Rasmussen, 2010). Our

analysis indeed shows a strong negative effect of secondary stressors on the health of the refugees and that this negative effect of stressors is mediated by stress, which is a pattern also found in relevant literature (Nelson & Simmons, 2003). When combining both the negative and positive effects on refugees' general health, we find that shared identity-based support process seems to have a buffering effect to the negative effect by stressors. This effect is similar to what was found among survivors of earthquakes, where community identification and collective efficacy were found to mediate the relation between earthquake experience and well-being (Muldoon et al., 2017).

However, we emphasise that this buffering effect - although important - is not enough to encounter the three times stronger effect of the stressors on general health, which explains why the refugees are in serious distress and in need of external support. In addition to significantly harming the general health of the refugees, secondary stressors seem also to hinder the engagement of refugees in collective support efforts to help other refugees, which makes sense as struggling with secondary stressors can be exhausting in time, effort and resources.

Nevertheless, we suggest that such support process can be an effective base for interventions that approach the refugees as a group at community level, rather than simply as individuals. The presence of self-help mechanisms in the refugees' community co-existing with negative state of general health among them does not necessarily show its inefficiency, rather that the magnitude of serious challenges posed by the exile environment, or the lack of resources to utilise such mechanisms that sometimes manifest as a network of social relations capable of mobilising resources quickly and in high efficiency (Alfadhli & Drury, 2018a).

5.5.3. Emergent Identity

We suggest that time is a crucial factor in any attempt to understand the psychosocial support dynamics and general health of refugees in exile, and we were not surprised to find a moderation effect of time spent in exile increasing the chance that exposure to secondary

stressors is associated with common fate with other refugees. However, we would like to emphasise that this suggestion needs more investigation, because the majority of our participants (84.5%) spent four years or more in Jordan, which is expected due to the fact that Jordan officially closed its borders with Syria in 2014 (The Jordan Times, 2015; UNHCR, 2015c). We suggest this effect should be tested among additional samples that have a larger number of refugees who spent a shorter time in exile to have more confidence in drawing conclusions about the moderation effect and to what extent it can support the emergent shared identity hypothesis.

5.5.4. Contribution

Although the literature about social support and solidarity among refugees of conflict across different disciplines has highlighted the importance of identity (Curley, 2009; Chatty, Mansour, & Yassin, 2013; Moulin, 2010; Palmgren, 2013), the present paper is the first to shed light on the process of support and the central role of shared social identity in these mechanisms. Other studies described the emergence of shared identity among refugees without exploring its role in social support dynamics or providing a quantitative analysis of this process (e.g., Moulin, 2010). In addition to highlighting the role of shared social identity as a strong mediator and predictor of providing many kinds of support, we also highlighted the importance of expected support as a predictor of collective efficacy, which could guide future interventions that target enhancing collective efficacy among refugee communities in developing countries.

The second major contribution goes beyond extending the theoretical model of shared identity-based support to context beyond emergencies, to extend the model conceptually and situating it in larger context, by including general health as an ultimate output of support, in addition to including secondary stressors for their crucial role in the life of refugees of conflict.

5.5.5. Limitations and Future Work

For the purpose of this project, we used convenience samples, and thus we do not assume that participants were representative of the population of Syrian refugees in Middle East, as the recruitment locations (Facebook and a community centre) are expected to exclude some refugees who have no access to such locations. Due to the differences in exile conditions, we also anticipate some differences in Syrian refugee experiences across different host communities in Middle East like suffering different secondary stressors (e.g., language barriers or legal restrictions). In addition, both studies were cross-sectional and could not provide insights to causality relations between the variables.

Although the sample of this study may not be representative, the results suggest the presence of an identity-based support process among the refugees and thus encourages us to further test our model and develop our hypothesis using a more representative sample with a longitudinal design, perhaps in other refugee populations.

6. Discussion

The literature review paper (chapter 2) was the starting point for this project as it demonstrated a gap in the literature concerned with psychosocial support among refugees of conflict in developing countries, that the social identity can contribute to. As mentioned in the paper, the relevant literature highlighted the importance of secondary stressors (exile stressors) and indicated a role of social identity among the refugees in their collective response to these challenges but without examining the process of this type of support. The paper aimed to inform public policy about an important mechanism of collective resilience that was under the radar of the field; thus the focus was mainly on the content of the relevant literature that included, and not the wide variety of methods used, which are often not comparable with each other, and did not use standard measures of social identity. However, the paper did include a high-quality review by Miller and Rasmussen (2010) that critically evaluated studies measuring exposure to war trauma effects on mental health of refugees. Their review not only highlighted the importance of exile stressors' effect on the mental health of refugees, but also showed how these stressors interact with the relation between exposure to war trauma and trauma-related disorders (i.e., PTSD), a result that was later supported by other studies (e.g., Im, Ferguson, Warsame, & Isse, 2017; Jayawickreme et al., 2017; Schafer, Masoud, & Sammour, 2014).

My project contributed to filling the gap in this literature by providing both qualitative and quantitative evidence of an effective emergent shared identity-based support mechanism that seems to buffer the negative effect of secondary stressors among refugees of conflict in a developing country, in addition to revealing the process underlying this type of support. Revealing the process and exploring it quantitatively was helpful not only to understand the factors behind the social support (i.e., expected support, different types of support and

collective efficacy) among the refugees and the relations between them, but also advancing the theoretical understanding the phenomenon. One study covered in the review that touched on the issue of emergent shared identity among the refugees, was Moulin (2010) that referred to it by "refugeeness" that arises from sharing the same conditions, which might lead to a conclusion that shared identity - and the support based on it - is an automatic straightforward result of objective conditions rather than an interactive cognitive process. This is a reminder of a criticism of the social identity approach (discussed in detail in the literature review of the overview chapter), which suggested that collective and cooperative behaviour is merely based on interdependency and motivated by personal self-interest (Rabbie & Horwitz, 1988). This might raise questions like: Do we need shared social identity? Is common fate enough to create the group benefits? Our analysis in paper 4 provides evidence in line with the social identity approach literature by showing that shared social identity and common fate appear as two distinctive factors in factor analysis, and that shared social identity - compared to common fate - is a far better predictor of all factors and outcomes of the support process², a result that also found in the Chile earthquake study (Drury et al, 2016).

6.1. Overview of Objectives and Findings

This research project aimed to answer the following main questions; what are the challenges that the refugees struggle with in exile? What kind of social support do the refugees offer each other? To what extent do the refugees identify with the other refugees as members of one group? What is the role of this shared identity in the support process? And finally, would identifying with other refugees and engaging in support activities be related to well-being?

² Common fate only predicted shared identity, coordinated support and expected support, while shared social identity was a strong predictor of emotional support, practical support, coordinated support, expected support and collective efficacy.

6.1.1. The challenges

In line with the literature, refugees suffered the most from secondary stressors that arise from exile. The secondary stressors typology (paper 3) was necessarily needed for the project, to identify a spectrum of exile stressors and relation between them, in addition to providing a baseline to measure such stressors. Using observations, interviews and a survey questionnaire, we identified three main groups of secondary stressors that the participants were facing. Unsurprisingly, the refugees struggled the most with financial stressors (e.g., unemployment, poverty and living expenses), environmental stressors arise from exile and are either circumstantial (e.g., services and legal requirements) or created by this environment (e.g., instability and lack of familiarity), and social stressors, which were either due to being targeted as a refugee by the locals (e.g., discrimination) or more traumatic stressors from both locals and other refugees (e.g., assault). Many of the stressors found among our participants were similar to exile stressors found among other refugees of conflicts in developing countries, like in the case of refugees in Afghanistan who reported struggling with poverty, unemployment, the security situation, violence and pollution (Panter-Brick, Eggerman, Mojadidi, & McDade, 2008) and Iraqi refugees in Egypt who were struggling with inaccessibility to work, education, and health services, social isolation and separation from family and friends, in addition to feelings of uncertainty (El-Shaarawi, 2012).

Due to the importance of secondary stressors and their effect on the well-being of refugees and the unsuitability of existing scales (discussed in chapter 4), I decided to develop a tool to measure the stressors to better understand any possible roles in the support process and to compare the negative effect of secondary stressors to the possible positive effect of the shared social identity-based support on the well-being of refugees. I developed a typology of secondary stressors among a sample of Syrian refugees in Jordan that included fifty-one stressors and conducted an exploratory factor analysis on the data to come up with an initial scale to measure the secondary stressors among participants from the same population. However, I recognise two important points in regard to this scale of secondary stressors that

makes it a work under development, rather than a ready-to-use scale. First, the 15-item scale captures only a part of the spectrum of secondary stressors that the refugees struggle with in reality. For example, the interview data suggested stressors not captured in the final version of the scale (e.g., living in poor housing and separation from relatives). Second, the method of building the initial scale (factor analysis) using items with a mixed response anchor might have affected the resulting scale. Nevertheless, I found that the secondary stressors scale showed results in line with theory (i.e., positive correlation with stress and negative correlation with well-being), which indicate some validity of the scale.

6.1.2. The support

We found that social support was common among the community of Syrian refugees that was offered on a personal level (e.g., hosting a newly arriving family or sharing furniture and medicine). We also found examples of collective support, where the refugees came together as a group and helped fellow refugees, which included teaching after school classes to Syrian children, organising aid caravans to the refugee tents on the city outskirts and helping them navigate through the bureaucratic and legal system. These forms of social support reflect an important part of the refugee's experience as part of a resilient community that helps them to respond to the stressors of exile. The benefits mentioned above that have also been found among refugees in other developing countries, like providing work to fellow refugees in Thailand (Palmgren, 2013) or helping with health needs in Lebanon (Chatty, Mansour, & Yassin, 2013), may explain the preference of refugees to live near other refugees (even with different social backgrounds) and sometimes pay higher rent to achieve that (see chapter 3).

6.1.3. Shared social identity

From the interviews with the refugees, the majority of those who provided support to other refugees identified with them as members of the same refugee group. This sense of shared identity appears to develop in exile and as a result of exile challenges and processes where the refugees are treated as a group seems to create a sense of common fate. The

ethnography participants (chapter 3) showed how their relations in exile went through radical changes, where new relationships were established in exile with people from different backgrounds and classes than before the war. Furthermore, some participants showed identification not just with Syrian refugees but even with refugees in general (globally). This observed tendency to affiliate and form new supportive relations with strangers further suggests that it is wrong to assume that people in times of crises will revert to a primitive response of selfishness and competitiveness (Drury, Cocking, & Reicher, 2009b). In contrast, the Syrian refugees showed a sense of solidarity and belonging to an emergent active community responding to interruption of their previous life with new and serious challenges, similar to what has been documented among people effected by natural disasters (Drury, 2012).

This shift in affiliation is an indication of a cognitive change in social identity where others and their interests become part of our self and interest. The transformation appears to change the way some of them perceive themselves (self-categorization) and others around them (shared social identity). Neville and Reicher (2011) differentiate between these two aspects of social identity, where the individuals can identify with the social category - 'self-categorization' - and also can perceive others around them as members of that social category - 'shared identity'; they emphasise that benefit of identity-based processes (e.g., support, validation and sense of purpose) are determined by the latter. For that reason, we chose to focus on shared social identity in this research project due to its crucial role in facilitating social support.

Moulin (2010, p. 365) described how identification with other refugees' '*refugeeness*' happens through "the displaced nature of their everyday experience" such as restrictions on mobility and common perception of assistance they receive from the local authorities, which is similar to what we found among the Syrian refugees (chapter 3) who reported sharing a sense of membership with other refugees based on shared struggle. In a quantitative analysis

of the survey data (chapter 5, study 2), we found evidence that exposure to secondary stressors predicts common fate (which is the main predictor of identification) only among the refugees who spent a long time (4-5 years) in exile, but not refugees who were recently displaced. We take this result as supportive evidence that the shared social identity among refugees is an emergent identity. People who face more stressors tend to feel and share more common fate and thus more expected to identify with others who face same challenges. This is an expected coping strategy in line with the Social Identity Model of Identity Change (SIMIC; Jetten & Pachana, 2012), which assumes that people can deal with stress caused by losing old identities by replacing them with new identities. The SIMIC model explains how they not only substitute the old grounding and sense of belonging with new ones, but also provide a base to receive and give social support (Jetten & Pachana, 2012). This is especially true among our participants, whom most of them seems to adopt the new 'refugee' identity (Figure 6.1), which was found to be helpful for the refugees when facing their stressful situation.

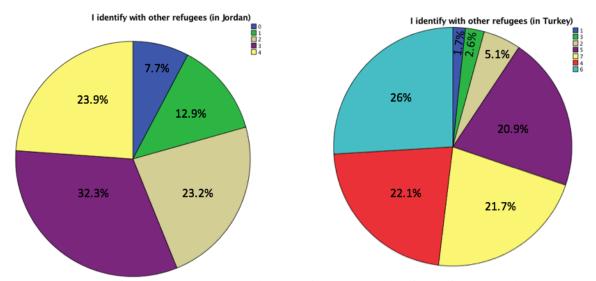


Figure 6.1: Response of participants to a question about identification with other refugees (from "Strongly Disagree" to "Strongly Agree").

6.1.4. Support process

There are multiple motives that drive Syrian refugees to provide social support to other refugees that include being part of a traditional network (e.g., tribe or relatives) or

simply out of humanistic values. However, we found that identification with other refugees as members of the same group is a major motive for providing support to other refugees. This claim is supported by the ethnographic data, where most of the participants who offered support recognise their membership in the refugees' group as the main reason behind their engagement in support (emotional, practical and collective). Also, the fact that the collective initiatives were facilitated by the social networks formed in exile between people from different Syrian backgrounds and classes. This sense of belonging to an active group of members with common challenges, which motivates them to act in solidarity and provide mutual support, is a reminder of a pattern of solidarity among strangers which has been documented in emergencies and disasters (e.g., 2005 London bombings; Drury, Cocking, & Reicher, 2009a), where many people who do not necessarily know each other start to feel and act like a group, which facilitates support and coordinated efforts toward a common goals.

The analysis of the surveys we conducted among Syrian refugees in Jordan and Turkey also supports the central role of shared identity while providing more details regarding the process. Common fate was found to be a base for shared identity, which is a major motivation for providing all kinds of support. This pattern of social identity-based support is in line with the Social Identity Model of Collective Resilience (SIMCR), were common fate is an antecedent of people to share social identity that have consequences both cognitive (shared definitions and goals) and relational (trust, expecting support and giving support), which in turn increases coordination and sense of efficacy (Drury, 2012).

Our path analysis results (chapter 5) showed results similar³ to the social identitybased process found among people affected by the 2010 Chile earthquake (Drury et al., 2016). Here, exposure to the disaster - through a sense of common fate - predicted shared social identity, which in turn predicted expected support and providing emotional support, in addition to predicting a sense of collective efficacy and coordinated support (both mediated

³ There were minor variations in mediation patterns (more details in chapter 5 study 2)

by expected support). In the case of refugees, we found that high exposure to secondary stressors led to a sense of common fate only among participants who spent a long time in exile (three or more years)⁴, but common fate was found to be a strong predictor of shared social identity among refugees. Shared social identity was found to be a strong predictor of expected support and providing all types of support, in addition to predicting collective efficacy (partially mediated by expected support).

These qualitative and quantitative results provide initial evidence that shared social identity-based support does exist among Syrian refugees in neighbouring countries (and possibly among refugees of conflict in developing countries in general), and that the process of such support is similar to what has been documented among people affected by mass emergencies and natural disasters.

6.1.5. Well-being of the refugees

Finally, in an attempt to asses any possible impact of the support process on wellbeing in the presence of negative effects of secondary stressors, we tested indirect effects (chapter 5) and found positive pathways from the shared identity-based support on well-being of the refugees, through collective efficacy. These positive paths seem to suggest a buffering effect to encounter the negative impact of the secondary stressors on well-being (mediated by stress). This effect is not a traditional pattern in the social cure literature whereby perceived support is the key mechanism (i.e., stress reduction; Haslam, O'Brien, Jetten, Vormedal, & Penna, 2005). We did test for moderations and found that shared social identity and factors related to it (i.e., emotional support, practical support, coordinated support, expected support and collective efficacy) did not reduce the stress caused by secondary stressors or even reduce the negative effect of stress on general health of the refugees. However, recent studies found that the effect of social identity on wellbeing can be through elevating factors

⁴ Interaction details are found in chapter 5 study 2, also discussed at the beginning of this chapter.

positively related to well-being, rather than stress reducing. A mixed method study by McNamara and colleagues (2013) explored social identity and wellbeing among a stigmatized community and found that community identification predicted social support and collective efficacy, as well as increasing wellbeing. In a recent survey among people in Nepal affected by an earthquake, it was found that the sense of collective efficacy mediated the effect of earthquake experience on post-traumatic stress (Muldoon et al., 2017), which is similar to the buffering pathway found in our research where shared identity-based processes have a positive impact on the general health of the refugees mediated by a sense of collective efficacy (more details in chapter 5). However, we acknowledge that there are other known outcomes of shared social identity like providing purpose, meaning and validation (Neville & Reicher, 2011), that could contribute to the well-being and health of the refugees.

Membership in the refugees' group also has a dark side due to the stigma attached to it, which is expected to have a negative effect on the refugees' wellbeing and health. Some participants in the interviews showed negative reaction to being labelled as a 'refugee' and some of them explicitly rejected the label. Such rejection indicates a possible negative effect on well-being as a result of self-categorization with the refugee identity, which is found in other cases of identifying with stigmatic labels (e.g., homeless people; Walter, Jetten, Parsell, & Dingle, 2015). Although understanding the role of stigma was not within the scope of this project, we do believe that it is important to focus on how the refugees see themselves and are seen by others in order to fully understand the intersections between social identity, wellbeing and collective resilience among refugees of conflict in developing countries.

6.2. Theoretical Implications

This research project shed light on the process and mechanism of social support among refugees of conflict in developing countries, by providing initial evidence that the dynamics of support among refugees of conflict is similar to what research found among

people affected by disasters. Indeed, our work benefits from the disaster support paradigm in both areas of support process and the classification system of secondary stressors, but it also supports such paradigms by expanding its explanatory field to include the setting of refugees of war.

Another area where our project offers contributions to is the area of mental health of refugees of conflicts. We presented an additional evidence on the negative effect of secondary stressors on the mental health and well-being of the refugees. However, our original contribution in this particular area is that we offered big picture analysis that combined both negative effect of secondary stressors and positive effect of shared identity-based support on the refugees well-being.

In addition, we introduced the term "secondary stressors" to the setting of refugees of conflict and established a suggested typology of such stressors, as a step toward developing a scale of secondary stressors among refugees of conflict in the Middle East.

6.3. Practical Implications

We enforce the message that secondary stressors among refugees of conflict needs more attention and effort, and hope that our work will help provide a better understanding of the nature of such stressors. However, we provide a comprehensive approach to such challenges by showing that there is more to do than attempting to decrease the exposure to secondary stressors, but also highlight a way to buffer the negative effect of the remaining stressors on refugees' health. Highlighting shared social identity as an important resource in protracted conflict settings can inform the response guidelines to one additional strength in the refugees' community, that could be utilised to improve the conditions of refugees and empower them.

Specifically, we recommend social identity-based interventions (e.g., countering social isolation), which have been found to be beneficial for mental health (Haslam, Cruwys,

Haslam, Dingle, & Chang, 2016). Based on this, we recommend that interventions can best utilise the capacity of refugees by including them in the intervention design and approaching them as a group, instead of as individuals. Field guidelines for practitioners working with refugees can also benefit by being aware of the positive role of shared "refugee" identity and how it can be empowering instead of stigmatizing. Indeed, refugees do help each other, but it is important to understand that refugees depend on external help, and they have a far greater capacity to do even better if provided with much needed resources. Moreover, we endorse a collaborative approach in designing interventions, which includes researchers, practitioners and most importantly representatives of the local affected community participating in a mutual decision-making process, especially if empowerment is a main goal, as "the role of the intervener, facilitator, or change agent who, in collaboration with those who reside in the setting, seeks to create and understand the conditions that permit change in relationships and environments that lead to development of empowerment" (Rappaport, 1987, p. 130).

6.4. Limitations & Future Work

This study was designed to achieve an exploration in a small community, seeking initial answers and suggesting theoretical framework that should be investigated in further research. Thus, there are issues about generalising the results of this study. We focused on urban refugees in developing countries mainly due to the fact that they constitute the majority of refugees globally (UNHCR, 2017a), and have distinctive conditions compared to refugees in developed countries (Roberts & Browne, 2011). We should be careful not to necessarily apply the results of this study to refugees in camps or in developed countries, as these settings vary in the type of challenges, including the social identity dynamics (e.g., culture or percentage of refugees to locals). The interviews sample was small and not necessarily representative of other urban refugees for two reasons. First, the neighbourhood that the ethnography took place in was not highly diverse, as the majority of the refugees (nine out of 13 interviews) were from the same region in Syria (Dara'a). Second, the researcher had a

lower chance to do interviews with women (only three interviews) due to cultural restrictions on cross-gender private meetings despite the fact that women constitute half of the Syrian refugee population in Jordan (UNHCR, 2018a). As mentioned in the research strategy section, our decision to use convenient samples was acceptable for the purpose of initial testing of the shared identity-based support process among a new population and context other than the one where it was developed. However, this method of sampling posed a serious hurdle when we faced the need to develop a scale of secondary stressors, which requires larger and a more diverse sample than we had access to during this project.

In addition to the representation restrictions, there is the issue of research design where we used cross-sectional designs that test correlational links between variables rather than testing causality.

The best way to move forward and advance this research endeavour is: first to refine the secondary stressors scale by collecting more data among a large representative sample of refugees in different countries in the Middle East; then attempt to replicate the model survey (with an improved secondary stressors scale) among samples of refugees from different countries in the region as a longitudinal study in order to test our theoretical model and to draw causal conclusions about the relations between variables.

There were aspects of the refugees' experience in relation to sharing the refugee identity that came to our attention during the analysis as important, but still we decided not to pursue in order to maintain a focused research scope and due to time limitations of the PhD project. Two main areas of investigation that we consider as important to expand and improve our current understanding of this research topic are contact theory and identity stigma. Therefore, we believe that a more diverse theoretical approach should be adopted that examines the contact between refugees and other groups (especially locals) in addition to looking at the negative aspect of the refugee identity and see how these aspects effect the refugees' well-being and social interactions with other refugees or other groups. One criticism could be raised to our findings is a general one, where evidence showing a community collective resilience could make it seem as independent and might be used as an excuse to withhold support for it. To this I respond that the resilience in the refugees' community this project focused on is more of capacity than mechanisms which is independent of external resources. The newly formed social networks in exile are channels inside the refugees' community that are capable of delivering support efficiently but cannot function without resources.

6.5. Conclusions

This research project provides suggestive evidence of an emergent shared identitybased support among Syrian refugees in the Middle East. This social support seems to have a positive impact on the well-being of the refugees by buffering the negative impact of secondary stressors that the refugees find themselves struggling with for many years. Exile positions refugees against tough odds of stressors of poverty with restrictions on work, many bureaucratic demands in unfamiliar environments, all within a social environment that occasionally is prejudiced, acts mostly discriminative against them and strongly resists integrating them. This project collected pieces of evidence on the process by which the refugees identify with their 'refugee' group members in exile, that transcends their pre-exile identities. From a perception of common negative conditions emerges a sense of common fate as a driving force for a process that discovers constructive spaces of agency within a stigmatic enforced identity. An agency that manifests through new social relations and networks that actively reconstruct the refugees' community through different levels of actions, from collective coordinated initiatives to simple improvised gestures, like helping a neighbour to move in.

Not all refugees provided support to other refugees, and not all those who did provide help to other refugees identified with them. However, those who provided help to fellow refugees out of membership in the refugee group, showed us how the refugees' community

has an internal mechanism of social support that should be supported and could be incorporated in interventio

References

- Adhikari, P. (2012). The plight of the forgotten ones: Civil war and forced migration. *International Studies Quarterly*, *56*(3), 590–606. <u>doi.org/10.1111/j.1468-2478.2011.00712.x</u>
- Admirand, P. (2014). The ethics of displacement and migration in the Abrahamic faiths: Enlightening believers and aiding public policy. *Journal of Ethnic and Migration Studies*, 40(4), 671–687. <u>doi.org/10.1080/1369183X.2013.847360</u>
- Agier, M. (2002). Between war and city: Towards an urban anthropology of refugee camps. *Ethnography*, *3*(3), 317–341. <u>doi.org/10.1177/146613802401092779</u>
- Alfadhli, K., & Drury, J. (2018a). The role of shared social identity in mutual support among refugees of conflict: An ethnographic study of Syrian refugees in Jordan. *Journal of Community & Applied Social Psychology*, 28(3), 142-155. <u>https://doi.org/10.1002/casp.2346</u>
- Alfadhli, K., & Drury, J. (2018b). A Typology of Secondary Stressors Among Refugees of Conflict in the Middle East: The Case of Syrian Refugees in Jordan. *PLoS Currents Disasters*. Edition 1. doi: 10.1371/currents.dis.4bd3e6437bff47b33ddb9f73cb72f3d8
- Alfadhli, K., & Drury, J. (2016). Psychosocial support among refugees of conflict in developing countries: A critical literature review. *Intervention*, *14*(2), 128. <u>doi.org/10.1097/WTF.00000000000119</u>
- Allden, K., Jones, L., Weissbecker, I., Wessells, M., Bolton, P., & Betancourt, T. et al. (2009). Mental health and psychosocial support in crisis and conflict: Report of the mental health working group. *Prehospital And Disaster Medicine*, 24(S2), s217-s227.

http://dx.doi.org/10.1017/s1049023x00021622

Almakhamreh, S., & Hundt, G. L. (2012). An examination of social work interventions for use with displaced Iraqi households in Jordan. *European Journal of Social Work*, *15*(3), 377–391.

Al-Miqdad, F. (2007). Iraqi refugees in Syria. Forced Migration Review, 11, 19-20.

- Alsalem, R., & Riller, F. (2013). UNHCR slashes waiting time, clears backlog of Syrian registrations in Jordan. Retrieved February 26, 2018, from <u>http://www.unhcr.org/news/makingdifference/2013/10/524d5e4b6/unhcr-slashes-waiting-time-clearsbacklog-syrian-registrations-jordan.html</u>
- Al-Smadi, A. M., Halaseh, H. J., Gammoh, O. S., Ashour, A. F., Gharaibeh, B., & Khoury, L. S. (2016).
 Do Chronic diseases and availability of medications predict post-traumatic stress disorder (PTSD) among Syrian refugees in Jordan? *Pakistan Journal of Nutrition*, *15*(10), 936–941. ________
 doi.org/10.3923/pjn.2016.936.941
- Arendt, H. (1943). We refugees. Menorah Journal, 31(1), 69–77.
- Athamneh, A. B., Momani, F., & Radaideh, Y. (2016). Jordanians' perceptions of the spillovers of the Syrian refugee crisis. Refugees, Displaced Persons, and Forced Migration Studies Center.
- Atlas, M. (2009). Experiencing displacement: Using art therapy to address xenophobia in South Africa. *Development*, 52(4), 531–536. <u>doi.org/10.1057/dev.2009.74</u>
- Bader, F., Sinha, R., Leigh, J., Goyal, N., Andrews, A., Valeeva, N., ... Doocy, S. (2009). Psychosocial health in displaced Iraqi care-seekers in non-governmental organization clinics in Amman, Jordan: An unmet need. *Prehospital and Disaster Medicine*, 24(4), 312–320.
- Badri, A., den Borne, H. W., & Crutzen, R. (2013). Experiences and psychosocial adjustment of Darfuri female students affected by war: An exploratory study. *International Journal of Psychology*, 48(5), 944–953. doi.org/10.1080/00207594.2012.696652
- Bandura, A. (Ed.). (1995). Self-Efficacy in Changing Societies. Cambridge ; New York: Cambridge University Press.
- Basheti, I. A., Qunaibi, E. A., & Malas, R. (2015). Psychological impact of life as refugees: A pilot study on a Syrian camp in Jordan. *Tropical Journal of Pharmaceutical Research*, *14*(9), 1695–1701.
- BBC. (2016, March 2). Jordan raid "foiled IS attacks plot." BBC News. Retrieved from <u>http://www.bbc.co.uk/news/magazine-35701841</u>

- Beaumont, P. (2016, June 6). Jordan says intelligence officers killed in refugee camp attack. *The Guardian*. Retrieved from http://www.theguardian.com/world/2016/jun/06/jordan-intelligence-officers-killed-refugee-camp-attack-baqaa
- Bentler, P. M. (2007). On tests and indices for evaluating structural models. *Personality and Individual Differences*, 42(5), 825–829. doi.org/10.1016/j.paid.2006.09.024
- Bodeker, G., & Neumann, C. (2012). Revitalization and development of Karen traditional medicine for sustainable refugee health services at the Thai-Burma border. *Journal of Immigrant & Refugee Studies*, 10(1), 6–30.
- Bogac, C. (2009). Place attachment in a foreign settlement. *Journal of Environmental Psychology*, 29(2), 267–278. doi.org/10.1016/j.jenvp.2009.01.001
- Bradley, M. (2014). Rethinking refugeehood: Statelessness, repatriation, and refugee agency. *Review of International Studies*, 40(1), 101–123. <u>doi.org/10.1017/S0260210512000514</u>
- Breakwell, G., Smith, J. A., & Wright, D. B. (Eds.). (2012). *Research Methods in Psychology* (4 edition). Los Angeles: SAGE Publications Ltd.
- Breslau, J. (2004). Cultures of trauma: Anthropological views of posttraumatic stress disorder in international health. *Culture, Medicine and Psychiatry*, *28*(2), 113–126. _ doi.org/10.1023/B:MEDI.0000034421.07612.c8
- Brewer, J. D. (2000). Ethnography. Buckingham: OPEN UNIVERSITY PRESS.
- Briant, N., & Kennedy, A. (2004). An investigation of the perceived needs and priorities held by African refugees in an urban setting in a first country of asylum. *Journal of Refugee Studies*, *17*(4), 437–459.
- Bulley, D. (2014). Inside the tent: community and government in refugee camps. *Security Dialogue*, 45(1), 63–80. <u>doi.org/10.1177/0967010613514788</u>
- Bizumic, B., Reynolds, K. J., Turner, J. C., Bromhead, D., & Subasic, E. (2009). The Role of the Group in Individual Functioning: School Identification and the Psychological Well-Being of Staff and Students. *Applied Psychology*, 58(1), 171–192. <u>https://doi.org/10.1111/j.1464-0597.2008.00387.x</u>

- Buyer, M. (2008). Negotiating identity and displacement among the Somali refugees of Cape Town. *South African Historical Journal*, 60(2), 226–241. <u>doi.org/10.1080/02582470802416476</u>
- Chaaya, M., Osman, H., Naassan, G., & Mahfoud, Z. (2010). Validation of the Arabic version of the Cohen perceived stress scale (PSS-10) among pregnant and postpartum women. *BMC Psychiatry*, *10*(1), 111.
- Chatty, D., Mansour, N., & Yassin, N. (2013). Statelessness and tribal identity on Lebanon's eastern borders. *Mediterranean Politics*, *18*(3), 411–426. <u>doi.org/10.1080/13629395.2013.834566</u>
- Collier, P., & Betts, A. (2017, March 22). Why denying refugees the right to work is a catastrophic error | Paul Collier and Alexander Betts. *The Guardian*. Retrieved from <u>http://www.theguardian.com/world/2017/mar/22/why-denying-refugees-the-right-to-work-is-a-catastrophic-error</u>
- Crumlish, N., & O'Rourke, K. (2010). A systematic review of treatments for post-traumatic stress disorder among refugees and asylum-seekers. *The Journal of Nervous and Mental Disease*, *198*(4), 237–251. <u>doi.org/10.1097/NMD.0b013e3181d61258</u>

Curley, B. (2009). Siting Sudaneseness: Territory, practice, and identity in aragi. Refuge, 26(2), 183–190.

Davenport, C. A., Moore, W. H., & Poe, S. C. (2003). Sometimes you just have to leave: Domestic threats and forced migration, 1964-1989. *International Interactions*, *29*(1), 27–55. _ doi.org/10.1080/03050620390182966

- Doosje, B., Branscombe, N. R., Spears, R., & Manstead, A. S. R. (1998). Guilty by association: When one's group has a negative history. *Journal of Personality and Social Psychology*, 75(4), 872–886. _ doi.org/10.1037/0022-3514.75.4.872
- Doosje, B., Ellemers, N., & Spears, R. (1995). Perceived intragroup variability as a function of group status and identification. *Journal of Experimental Social Psychology*, 31(5), 410–436. <u>doi.org/10.1006/jesp.1995.1018</u>

- Drury, J. (2012). Collective resilience in mass emergencies and disasters. In *The social cure: Identity, health and well-being* (p. 195). Hove, UK: Psychology Press.
- Drury, J., Brown, R., González, R., & Miranda, D. (2016). Emergent social identity and observing social support predict social support provided by survivors in a disaster: Solidarity in the 2010 Chile earthquake. *European Journal Of Social Psychology*, 46(2), 209-223.

http://dx.doi.org/10.1002/ejsp.2146

- Drury, J., Cocking, C., & Reicher, S. (2009a). The nature of collective resilience: Survivor reactions to the 2005 London bombings. *International Journal of Mass Emergencies and Disasters*, 27, 66-95.
- Drury, J., Cocking, C., & Reicher, S. (2009b). Everyone for themselves? A comparative study of crowd solidarity among emergency survivors. *British Journal of Social Psychology*, 48(3), 487–506. <u>doi.org/10.1348/014466608X357893</u>
- Drury, J., & Williams, R. (2012). Children and young people who are refugees, internally displaced persons or survivors or perpetrators of war, mass violence and terrorism: *Current Opinion in Psychiatry*, 25(4), 277–284. <u>doi.org/10.1097/YCO.0b013e328353eea6</u>
- Dudley, S. (2010). Feeling at home: Producing and consuming things in Karenni refugee camps on the Thai-Burma border. *Population, Space And Place, 17*(6), 742-755. http://dx.doi.org/10.1002/psp.639
- Eisenbruch, M., de Jong, J. T. V. M., & van de Put, W. (2004). Bringing order out of chaos: A culturally competent approach to managing the problems of refugees and victims of organized violence. *Journal of Traumatic Stress*, *17*(2), 123–131. <u>doi.org/10.1023/B:JOTS.0000022618.65406.e8</u>
- Eller, A., Cakal, H., & Sirlopu, D. (2016). Identity, contact, and health among majority and minority ethnic groups in Mexico and Chile. In S. McKeown, R. Haji, & N. Ferguson (Eds.), *Understanding Peace and Conflict Through Social Identity Theory* (pp. 295–315). Cham: Springer International Publishing. <u>doi.org/10.1007/978-3-319-29869-6_19</u>

El-Shaarawi, N. (2012). Living an uncertain future: An ethnography of displacement, health, psychosocial well-being and the search for durable solutions among Iraqi refugees in Egypt. CASE WESTERN RESERVE UNIVERSITY. Retrieved from

https://etd.ohiolink.edu/rws_etd/document/get/case1325709084/inline

- Ezard, N. (2012). Substance use among populations displaced by conflict: A literature review. *Disasters*, *36*(3), 533–557.
- Felke, T. P. (2010). It's been twenty years: The case of ethnic Armenian refugees from Nagorno-Karabakh and Azerbaijan. University of Connecticut.
- Ferris, E. G. (2007). Abuse of Power: Sexual Exploitation of Refugee Women and Girls. *Signs*, *32*(3), 584–591.
- Fiddian-Qasmiyeh, E. (2011). Introduction: faith-based humanitarianism in contexts of forced displacement. *Journal of Refugee Studies Vol.*, *24*(3), 429–439. doi.org/10.1093/jrs/fer033
- Field, A. (2013). *Discovering Statistics Using IBM SPSS Statistics*. SAGE. Retrieved from https://us.sagepub.com/en-us/nam/discovering-statistics-using-ibm-spss-statistics/book238032%20
- Fielding, A., & Anderson, J. (2008). Working with refugee communities to build collective resilience. Association for Services to Torture and Trauma Survivors Perth. Retrieved from http://www.asetts.org.au/Oldwebsite/resources/Documents/collectiveresilenceweb.pdf
- Ghumman, U., McCord, C. E., & Chang, J. E. (2016). Posttraumatic stress disorder in Syrian refugees: A review. *Canadian Psychology/Psychologie Canadienne*, 57(4), 246–253. _ doi.org/10.1037/cap0000069
- Groot, L. (2014). Resilient Action among Jordanian Women in Al Manara, Amman, in Response to Pressures on Charity Donations Posed by Syrian Refugees. Utrecht University.

- Gupte, J., & Mehta, L. (2009). Disjunctures in labelling refugees and oustees. In R. E. Joy Moncrieffe (Ed.), *The Power of Labelling* (pp. 64–79). London: Earthscan.
- Harding, S., & Libal, K. (2012). Iraqi refugees and the humanitarian costs of the Iraq war: What role for social work? *International Journal of Social Welfare*, 21(1), 94–104. <u>doi.org/10.1111/j.1468-</u> 2397.2011.00780.x
- Haslam, C., Cruwys, T., Haslam, S. A., Dingle, G., & Chang, M. X.-L. (2016). Groups 4 Health: Evidence that a social-identity intervention that builds and strengthens social group membership improves mental health. *Journal of Affective Disorders*, 194, 188–195. doi.org/10.1016/j.jad.2016.01.010
- Haslam, S. A., Eggins, R. A., & Reynolds, K. J. (2003). The ASPIRe model: Actualizing social and personal identity resources to enhance organizational outcomes. *Journal of Occupational and Organizational Psychology*, 76(1), 83–113.
- Haslam, S. A., Jetten, J., Postmes, T., & Haslam, C. (2009). Social identity, health and well-being: An emerging agenda for applied psychology. *Applied Psychology*, 58(1), 1–23. <u>doi.org/10.1111/j.1464-</u> 0597.2008.00379.x
- Haslam, S. A., McMahon, C., Cruwys, T., Haslam, C., Jetten, J., & Steffens, N. K. (2018). Social cure, what social cure? The propensity to underestimate the importance of social factors for health. *Social Science & Medicine*, *198*, 14–21. <u>https://doi.org/10.1016/j.socscimed.2017.12.020</u>
- Haslam, S. A., O'Brien, A., Jetten, J., Vormedal, K., & Penna, S. (2005). Taking the strain: Social identity, social support, and the experience of stress. *British Journal of Social Psychology*, 44(3), 355–370. <u>https://doi.org/10.1348/014466605X37468</u>
- Haslam, S. A., & Reicher, S. (2006). Stressing the group: Social identity and the unfolding dynamics of responses to stress. *Journal of Applied Psychology*, 91(5), 1037–1052. <u>https://doi.org/10.1037/0021-9010.91.5.1037</u>

- Haslam, S. A., Reicher, S. D., & Levine, M. (2012). When other people are heaven, when other people are hell: How social identity determines the nature and impact of social support. *The Social Cure: Identity, Health and Well-Being*, 157–174.
- Heim, D., Hunter, S. C., & Jones, R. (2011). Perceived discrimination, identification, social capital, and well-being: Relationships with physical health and psychological distress in a U.K. Minority Ethnic Community Sample. *Journal of Cross-Cultural Psychology*, 42(7), 1145–1164. _ doi.org/10.1177/0022022110383310
- Hopkins, N., & Reicher, S. D. (2017). Social identity and health at mass gatherings: Social identity at mass gatherings. *European Journal of Social Psychology*, 47(7), 867–877. <u>https://doi.org/10.1002/ejsp.2288</u>
- Hu, L., & Bentler, P. M. (1999). Cutoff criteria for fit indexes in covariance structure analysis:
 Conventional criteria versus new alternatives. *Structural Equation Modeling: A Multidisciplinary Journal*, 6(1), 1–55. doi.org/10.1080/10705519909540118
- Hunt, N., & Gakenyi, M. (2005). Comparing refugees and non-refugees: The Bosnian experience. *Anxiety Disorders*, *19*(6), 717–723.
- Iacobucci, D. (2010). Structural equations modeling: Fit Indices, sample size, and advanced topics. *Journal Of Consumer Psychology*, 20(1), 90-98. http://dx.doi.org/10.1016/j.jcps.2009.09.003
- The Inter-Agency Standing Committee (IASC). (2007). IASC Guidelines on Mental Health and Psychosocial Support in Emergency Settings. <u>doi.org/10.1037/e518422011-002</u>
- Im, H., Ferguson, A. B., Warsame, A. H., & Isse, M. M. (2017). Mental health risks and stressors faced by urban refugees: Perceived impacts of war and community adversities among Somali refugees in Nairobi. *International Journal of Social Psychiatry*, 63(8), 686–693. _ doi.org/10.1177/0020764017728966
- Iyer, A., Jetten, J., Tsivrikos, D., Postmes, T., & Haslam, S. A. (2009). The more (and the more compatible) the merrier: Multiple group memberships and identity compatibility as predictors of

adjustment after life transitions. *British Journal of Social Psychology*, *48*(4), 707–733. https://doi.org/10.1348/014466608X397628

- Jayawickreme, N., Mootoo, C., Fountain, C., Rasmussen, A., Jayawickreme, E., & Bertuccio, R. F. (2017). Post-conflict struggles as networks of problems: A network analysis of trauma, daily stressors and psychological distress among Sri Lankan war survivors. *Social Science & Medicine*, *190*(Supplement C), 119–132. <u>doi.org/10.1016/j.socscimed.2017.08.027</u>
- Jetten, J., Haslam, C., & Haslam, S. A. (Eds.) (2012). *The social cure: identity, health and well-being*. Hove; New York: Psychology Press.
- Jetten, J., & Pachana, N. (2012). Not wanting to grow old: A Social Identity Model of Identity Change (SIMIC) analysis of driving cessation among older adults. In *The social cure: Identity, health and well-being*. (pp. 97–113). New York, NY, US: Psychology Press.
- Jiang, H., & Carroll, J. M. (2009). Social capital, social network and identity bonds: a reconceptualization. In *Proceedings of the fourth international conference on Communities and technologies* (pp. 51–60). ACM.
- Jordans, M. J. D., Semrau, M., Thornicroft, G., & van Ommeren, M. (2012). Role of current perceived needs in explaining the association between past trauma exposure and distress in humanitarian settings in Jordan and Nepal. *British Journal of Psychiatry*, 201(4), 276–281. _ doi.org/10.1192/bjp.bp.111.102137
- Kaiser, T. (2006). Songs, discos and dancing in Kiryandongo, Uganda. Journal of Ethnic and Migration Studies, 32(2), 183–202. doi.org/10.1080/13691830500487399
- Karaman, M. A., & Ricard, R. J. (2016). Meeting the mental health needs of Syrian refugees in Turkey. *The Professional Counselor*, *6*(4), 318–327. DOI: 10.15241/mk.6.4.318
- Kibreab, G. (2003). Displacement, host governments' policies and constraints on the construction of sustainable livelihoods. *International Social Science Journal*, *55*(175), 57–67.

- Kibreab, G. (2004). Pulling the wool over the eyes of the strangers: Refugee deceit and trickery in institutionalized settings. *Journal of Refugee Studies*, *17*(1), 1–28.
- Kline, R.B. (2011). *Principles and practice of structural equation modelling*. (3rd. Ed.) New York: Guilford Press.
- Levine, M., Prosser, A., Evans, D., & Reicher, S. (2005). Identity and Emergency Intervention: How Social Group Membership and Inclusiveness of Group Boundaries Shape Helping Behavior.
 Personality and Social Psychology Bulletin, 31(4), 443–453.
 https://doi.org/10.1177/0146167204271651
- Lock, S., Rubin, G. J., Murray, V., Rogers, M. B., Amlôt, R., & Williams, R. (2012). Secondary stressors and extreme events and disasters: A systematic review of primary research from 2010-2011. *PLoS Currents Disasters*, 4. doi.org/10.1371/currents.dis.a9b76fed1b2dd5c5bfcfc13c87a2f24f

Lyons, E., & Coyle, A. (2016). Analysing qualitative data in psychology. London: Sage.

- Marshall, L. W. (2011). Toward a new definition of `refugee': Is the 1951 convention out of date?. *European Journal of Trauma and Emergency Surgery*, *37*(1), 61–66. <u>doi.org/10.1007/s00068-010-</u> <u>0052-7</u>
- McDougal, L., & Beard, J. (2011). Revisiting Sphere: new standards of service delivery for new trends in protracted displacement. *Disasters*, *35*(1), 87–101. <u>doi.org/10.1111/j.0361-3666.2010.01194.x</u>
- McGrath, J. (1981). The study of research choices and dilemmas. *American Behavioral Scientist*, 25(2), 179–210.
- McNamara, N., Stevenson, C., & Muldoon, O. T. (2013). Community identity as resource and context: A mixed method investigation of coping and collective action in a disadvantaged community. *European Journal of Social Psychology*, 43(5), 393–403. doi.org/10.1002/ejsp.1953

- Miller, K. E., Omidian, P., Rasmussen, A., Yaqubi, A., & Daudzai, H. (2008). Daily stressors, war experiences, and mental health in Afghanistan. *Transcultural Psychiatry*, 45(4), 611–638. <u>doi.org/10.1177/1363461508100785</u>
- Miller, K. E., & Rasmussen, A. (2010). War exposure, daily stressors, and mental health in conflict and post-conflict settings: Bridging the divide between trauma-focused and psychosocial frameworks. *Social Science & Medicine*, 70(1), 7–16.
- Minowa, M. (2003). Factor structure of the 12-item General Health Questionnaire in the Japanese general adult population. *Psychiatry and Clinical Neurosciences*, *57*(4), 379–383.
- Mirghani, Z. (2013). Healing through sharing: An outreach project with Iraqi refugee volunteers in Syria. *Intervention*, 11(3), 321–329. doi.org/10.1097/WTF.0000000000000006
- Moulin, C. (2010). Border languages: rumors and (dis)placements of (inter)national politics. *Alternatives*, *35*(4), 347–371.
- Mowafi, H. (2011). Conflict, displacement and health in the Middle East. *Global Public Health*, *6*(5), 472–487.
- Muldoon, O. T., Acharya, K., Jay, S., Adhikari, K., Pettigrew, J., & Lowe, R. D. (2017). Community identity and collective efficacy: A social cure for traumatic stress in post-earthquake Nepal: Identity and post-traumatic stress. *European Journal of Social Psychology*, 47(7), 904–915. doi.org/10.1002/ejsp.2330
- Nelson, D. L., & Simmons, B. L. (2003). EUSTRESS: AN ELUSIVE CONSTRUCT, AN ENGAGING PURSUIT. In *Research in Occupational Stress and Well-being* (Vol. 3, pp. 265–322). Bingley: Emerald (MCB UP). <u>doi.org/10.1016/S1479-3555(03)03007-5</u>
- Neville, F., & Reicher, S. (2011). The experience of collective participation: shared identity, relatedness and emotionality. *Contemporary Social Science*, 6(3), 377–396. <u>https://doi.org/10.1080/21582041.2012.627277</u>

- North Atlantic Treaty Organization (NATO) (2008). Psychosocial care for populations affected by major incidents, conflict, disasters and terrorism. Retrieved from <u>https://www.coe.int/t/dg4/majorhazards/ressources/virtuallibrary/materials/Others/NATO_Guidance_Psychosocial_Care_for_People_Affected_by_Disasters_and_Major_Incidents.pdf</u>
- Nunnally J C. Psychometric theory. New York: McGraw Hill, 1967, 640 p. University of Chicago, Chicago, IL.
- Palmgren, P. A. (2013). Irregular networks: Bangkok refugees in the city and region. *Journal of Refugee Studies*, 27(1), 21–41. doi.org/10.1093/jrs/fet004
- Pandey, K., Stevenson, C., Shankar, S., Hopkins, N. P., & Reicher, S. D. (2014). Cold comfort at the Magh Mela: Social identity processes and physical hardship. *British Journal of Social Psychology*, 53(4), 675–690. <u>https://doi.org/10.1111/bjso.12054</u>
- Panter-Brick, C., Eggerman, M., Mojadidi, A., & McDade, T. W. (2008). Social stressors, mental health, and physiological stress in an urban elite of young Afghans in Kabul. *American Journal of Human Biology*, 20(6), 627–641. <u>doi.org/10.1002/ajhb.20797</u>
- Porter, M., & Haslam, N. (2005). Pre-displacement and post-displacement factors associated With mental health of refugees and internally displaced persons: A meta-analysis. *JAMA*, 294(5), 602-612. _ doi.org/10.1001/jama.294.5.602
- Praharso, N. F., Tear, M. J., & Cruwys, T. (2017). Stressful life transitions and wellbeing: A comparison of the stress buffering hypothesis and the social identity model of identity change. *Psychiatry Research*, 247, 265–275. <u>doi.org/10.1016/j.psychres.2016.11.039</u>
- Preacher, K. J., & Hayes, A. F. (2008). Asymptotic and resampling strategies for assessing and comparing indirect effects in multiple mediator models. *Behavior Research Methods*, 40(3), 879–891. _ doi.org/10.3758/BRM.40.3.879
- Pupavac, V. (2002). Pathologizing populations and colonizing minds: International psychosocial programs in Kosovo. *Alternatives*, *27*(4), 489–511.

- Putnam, R. D. (1995). Bowling alone: America's declining social capital. *Journal of Democracy*, 6, 65–78.
- Quosh, C., Eloul, L., & Ajlani, R. (2013). Mental health of refugees and displaced persons in Syria and surrounding countries. *Intervention*, 11(3), 276-294.

http://dx.doi.org/10.1097/wtf.000000000000013

- Rabbie, J. M., & Horwitz, M. (1988). Categories versus groups as explanatory concepts in intergroup relations. *European Journal of Social Psychology*, 18(2), 117–123. https://doi.org/10.1002/ejsp.2420180204
- Ramadan, A. (2014). In the ruins of Nahr Al-Barid: Understanding the meaning of the camp. *Journal of Palestine Studies, 40*(1), 49–62.
- Rangkla, P. (2013). Refuge and emplacement through Buddhism: Karen refugees and religious practices in a northwestern border town of Thailand. *The Asia Pacific Journal of Anthropology*, *14*(1), 8–22. <u>doi.org/10.1080/14442213.2012.743581</u>
- Rappaport, J. (1987). Terms of empowerment/exemplars of prevention: Toward a theory for community psychology. *American Journal of Community Psychology*, *15*(2), 121–148.

https://doi.org/10.1007/BF00919275

- Riley, A., Varner, A., Ventevogel, P., Taimur Hasan, M. M., & Welton-Mitchell, C. (2017). Daily stressors, trauma exposure, and mental health among stateless Rohingya refugees in Bangladesh. *Transcultural Psychiatry*, 54(3), 304–331. <u>doi.org/10.1177/1363461517705571</u>
- Roberts, B., & Browne, J. (2011). A systematic review of factors influencing the psychological health of conflict-affected populations in low- and middle-income countries. *Global Public Health*, 6(8), 814– 829.
- Rodríguez, H., Trainor, J., & Quarantelli, E. L. (2006). Rising to the challenges of a catastrophe: The emergent and prosocial behavior following hurricane Katrina. *The ANNALS of the American Academy of Political and Social Science*, 604(1), 82–101. doi.org/10.1177/0002716205284677

- Schafer, A., Masoud, H., & Sammour, R. (2014). Mediation of daily stressors on mental health within a conflict context: a qualitative study in Gaza. *Intervention*, *12*(2), 171–186.
- Shumaker, S. A., & Brownell, A. (1984). Toward a theory of social support: Closing conceptual gaps. *Journal of Social Issues*, 40(4), 11–36.
- Sphere Project. (2011). *The Sphere Project: humanitarian charter and minimum standards in humanitarian response*. Rugby: The Sphere Project.
- Stevenson, C., McNamara, N., & Muldoon, O. (2014). Stigmatised identity and service usage in disadvantaged communities: Residents', community workers' and service providers' perspectives. *Journal of Community & Applied Social Psychology*, 24(6), 453–466. <u>doi.org/10.1002/casp.2184</u>
- Tajfel, H. (1974). Social identity and intergroup behaviour. *Information (International Social Science Council)*, *13*(2), 65–93.
- Tajfel, H., & Turner, J. C. (1979). An integrative theory of intergroup conflict. In W. G. Austin & S.Worchel (Eds.), The Social Psychology of Intergroup Relations (pp. 33–47). Monterey, CA: Brooks/Cole.
- Tay, A. K., Rees, S., Chen, J., Kareth, M., Lahe, S., Kitau, R., ... Silove, D. (2015). Associations of conflict-related trauma and ongoing stressors with the mental health and functioning of West Papuan refugees in Port Moresby, Papua New Guinea (PNG). *PLOS ONE*, *10*(4), e0125178. <u>doi.org/10.1371/journal.pone.0125178</u>
- The Jordan Times. (2015, April 1). Jordan closes border crossing with Syria. Retrieved September 10, 2017, from http://www.jordantimes.com/news/local/jordan-closes-border-crossing-syria
- Themnér, L., & Wallensteen, P. (2012). Armed conflicts, 1946–2011. *Journal of Peace Research*, 49(4), 565–575. <u>doi.org/10.1177/0022343312452421</u>
- Turner, J. C. (1982). Towards a cognitive redefinition of the social group. In H. Tajfel (Ed.), Social identity and intergroup relations (pp. 15–40). Cambridge, UK: Cambridge University Press.

- Turner, J. C., & Bourhis, R. Y. (1996). Social identity, interdependence and the social group: A reply to Rabbie et al. In *Social groups and identities: Developing the legacy of Henri Tajfel* (pp. 25–63).London: Routledge.
- Turner, Hogg, M., Oakes, P., Reicher, S., & Wetherell, M. (1987). *Rediscovering the social group: A self-categorization theory*. Basil Blackwell.
- Turner, J. C., & Reynolds, K. J. (2010). The story of social identity. In *Rediscovering Social Identity*, 1332. New York, NY: Psychology Press, Taylor & Francis.
- Tewari, S., Khan, S., Hopkins, N., Srinivasan, N., & Reicher, S. (2012). Participation in Mass Gatherings Can Benefit Well-Being: Longitudinal and Control Data from a North Indian Hindu Pilgrimage Event. *PLOS ONE*, 7(10), e47291. <u>https://doi.org/10.1371/journal.pone.0047291</u>

United Nations (UN). (2015). World economic situation and prospects 2015. New York: United Nations.

- United Nations (UN). (2018). UNdata | country profile | Jordan. Retrieved February 22, 2018, from http://data.un.org/CountryProfile.aspx?crName=Jordan
- United Nations Relief and Works Agency (UNRWA). (2018). Resolution 194. Retrieved January 26, 2018, from https://www.unrwa.org/content/resolution-194
- United Nations Relief and Works Agency (UNRWA). (2017, December 3). WHERE WE WORK. Retrieved December 3, 2017, from <u>https://www.unrwa.org/where-we-work/jordan</u>
- United Nations High Commissioner for Refugees (UNHCR) (2011, June 28). States Parties to the 1951 Convention relating to the Status of Refugees and the 1967 Protocol. Retrieved from <u>http://www.unhcr.org/uk/protection/basic/3b73b0d63/states-parties-1951-convention-its-1967-</u> <u>protocol.html</u>
- United Nations High Commissioner for Refugees (UNHCR). (2012). Global Trends 2011. Retrieved from http://www.unhcr.org/uk/statistics/country/4fd6f87f9/unhcr-global-trends-2011.html

- United Nations High Commissioner for Refugees (UNHCR). (2015a). Global trends forced displacement in 2014. Retrieved from <u>http://www.unhcr.org/uk/statistics/country/556725e69/unhcr-global-trends-</u> 2014.html
- United Nations High Commissioner for Refugees (UNHCR) . (2015b). Living in the shadows. Retrieved from http://www.unhcr.org/54b685079.pdf

United Nations High Commissioner for Refugees (UNHCR). (2015c). 12,000 people stranded at Syria-Jordan border in deteriorating conditions. Retrieved September 10, 2017, from <u>http://www.unhcr.org/news/briefing/2015/12/5666d4816/12000-people-stranded-syria-jordan-borderdeteriorating-conditions.html</u>

- United Nations High Commissioner for Refugees (UNHCR). (2016). Global trends forced displacement in 2015.pdf. Retrieved from http://www.unhcr.org/576408cd7.pdf
- United Nations High Commissioner for Refugees (UNHCR). (2016b). UNHCR Syria Regional Refugee Response. Retrieved 24 June. <u>http://www.data.unhcr.org/syrianrefugees/regional.php</u>
- United Nations High Commissioner for Refugees (UNHCR). (2017a). Global trends forced displacement in 2016. Retrieved from http://www.unhcr.org/dach/wp-

content/uploads/sites/27/2017/06/2016_Global_Trends_WEB-embargoed.pdf

- United Nations High Commissioner for Refugees (UNHCRb). (2017b, December 3). Syria Regional Refugee Response. Retrieved from <u>http://data.unhcr.org/syrianrefugees/country.php?id=107</u>
- United Nations High Commissioner for Refugees (UNHCR). (2017c, March 13). Jordan Inter-Agency Financial Tracking - 2016. Retrieved from <u>https://data.unhcr.org/jordan/fts/#sector=&quarter=1-</u> +First+Quarter&partner=&partnergap=
- United Nations High Commissioner for Refugees (UNHCR). (2018a). UNHCR Syria regional refugee response. Retrieved February 18, 2018, from <u>http://data.unhcr.org/syrianrefugees/regional.php</u>
- United Nations High Commissioner for Refugees (UNHCR). (2018b). Global Focus | Financials. Retrieved February 22, 2018, from http://reporting.unhcr.org/financial#tabs-financial-budget

- Van Aken, M. (2006). Dancing belonging: Contesting dabkeh in the Jordan Valley, Jordan. *Journal of Ethnic and Migration Studies*, 32(2), 203–222. doi.org/10.1080/13691830500487431
- Vezzali, L., Drury, J., Versari, A., & Cadamuro, A. (2016). Sharing distress increases helping and contact intentions via social identification and inclusion of the other in the self: Children's prosocial behaviour after an earthquake. *Group Processes & Intergroup Relations*, 19(3), 314–327.
- Vezzali, L., Versari, A., Cadamuro, A., Trifiletti, E., & Di Bernardo, G. A. (2016). Out-group threats and distress as antecedents of common in-group identity among majority and minority group members in the aftermath of a natural disaster: Natural disasters and common identity. *International Journal of Psychology*. <u>doi.org/10.1002/ijop.12406</u>
- Wachtendorf, T., & Kendra, J. M. (2004). Considering Convergence, Coordination, and Social Capital in Disasters (DRC Preliminary Papers). Delaware, US: Disaster Research Center. Retrieved from <u>http://udspace.udel.edu/handle/19716/737</u>
- Walter, Z. C., Jetten, J., Parsell, C., & Dingle, G. A. (2015). The Impact of Self-Categorizing as
 "Homeless" on Well-Being and Service Use: Self-Categorization and Well-Being. *Analyses of Social Issues and Public Policy*, 15(1), 333–356. doi.org/10.1111/asap.12089
- Warner, F. R. (2007). Social Support and Distress among Q'eqchi' Refugee Women in Maya Tecun, Mexico. *Medical Anthropoligy Quarterly*, 21(2), 193–217. <u>doi.org/10.1525/MAQ.2007.21.2.193</u>
- Wessells, M. G. (2009). Do no harm: toward contextually appropriate psychosocial support in international emergencies. *American Psychologist*, 64(8), 842–854. <u>doi.org/10.1037/0003-</u>

<u>066X.64.8.842</u>

 World Food Programme (WFP). (2015). WFP Forced To Make Deeper Cuts In Food Assistance For Syrian Refugees Due To Lack Of Funding. Retrieved February 26, 2018, from https://www.wfp.org/news/news-release/wfp-forced-make-deeper-cuts-food-assistance-syrian-refugees-due-lack-funding

- World Health Organization (WHO), & International Medical Corps. (2013). Assessment of Mental Health and Psychosocial Support Needs of Displaced Syrians in Jordan. Retrieved from http://www.alnap.org/pool/files/10-assessmentofmhneedsofdisplacedsyriansinjordanfinalversion.pdf
- Williams, J., & MacKinnon, D. P. (2008). Resampling and Distribution of the Product Methods for Testing Indirect Effects in Complex Models. *Structural Equation Modeling: A Multidisciplinary Journal*, 15(1), 23–51. <u>doi.org/10.1080/10705510701758166</u>
- Williams, R., & Drury, J. (2009). Psychosocial resilience and its influence on managing mass emergencies and disasters. *Psychiatry*, 8(8), 293–296. <u>doi.org/10.1016/j.mppsy.2009.04.019</u>
- Zaman, T. (2012). Jockeying for position in the humanitarian field: Iraqi refugees and faith-based organisations in Damascus. *Disasters*, 36(Supp. 1), S126—-S148. doi.org/10.1111/j.1467-<u>7717.2012.01286.x</u>
- Zetter, R. (2007). More labels, fewer refugees: remaking the refugee label in an era of globalization. *Journal of Refugee Studies*, 20(2), 172–192. <u>doi.org/10.1093/jrs/fem011</u>

Appendix 1: Paper 2: CONSENT FORM FOR PROJECT PARTICIPANTS Psychosocial support among refugees of conflict in Jordan

I agree to take part in the above University of Sussex research project.

The project has been explained to me and I have read and understood the information sheet, which I may keep for my records.

I understand that agreeing to take part means that I am willing to:

- Provide verbal responses to open ended questions for about 60 Min.
- Have my answers voice recorded with a mobile phone.

I understand that any information that could link me to my responses in the project will be kept safely and separately from the collected data.

I understand that my participation is voluntary, that I can choose not to participate in part or all of the project. And that I can withdraw at any time up to the point of study results submission, without being penalised or disadvantaged in any way.

I consent to the processing of my personal information for the purposes of this research study. I understand that such information will be treated as strictly confidential and handled in accordance with the British Data Protection Act 1998.

Name:

Signature:

Date:

Appendix 2: Paper 2: Interviews schedule

The general purpose of the study is to explore the needs of refugees of conflict and their social relations with other refugees and host communities. The interview will be audio-taped, and consist of open-ended questions about refugee experiences, past/current relationships and activities, school/workplace experiences, and views on identity, family and culture. We estimate that the interview will take about 60 minutes of your time.

- 1. Could you please tell me the story behind you becoming a refugee in Jordan? Was this a common experience?
- 2.

Now I would like you tell me about the process of becoming a refugee

- 3. Did you spend time in a refugee camp? Did you spend time in a neighbouring country to your home country?
- 4. When was the first time you started to see yourself as a refugee?
 What were your feelings toward other refugees?
 Did you feel as if you were in the same group?
 Were there any other groups you felt you belonged to?
 Did you identify with other refugees generally in your location or with other refugees from your country?

Now I would like you to tell me about your needs as a refugee

5. What were your needs before leaving your country? What were your needs during the journey to seek refugee status? Are you in poverty? Who helped you? How? Are you unemployed? Who helped you? How? Do you have insecurity problems? Who helped you? How? Do you have problems regard violence? Who helped you? How? Do you encounter discrimination? Who helped you? How? Do you have education problems? Who helped you? How? Do you have health problems? Who helped you? How? Do you have health problems? Who helped you? How? Do you have uncertainty problem? Who helped you? How? Do you have any other problems? Who helped you? How? Which one you struggled with mostly, urgent needs or daily stressors? Was this a common experience?

Now I would like you to tell me about your current social relations

6. How would you describe your relation with: Local community of your city (city you live in now)? People from your country living in your city? Other refugees living in your city?

- 7. How much time do you spend with: Local community of your city ? People from your country living in your city? Other refugees living in your city?
- 8. Who are the closest group to you now? What do you have in common?

Now I would like if you tell me about support available to refugees

9. Did you receive help from other refugees?
Did you offered help to other refugees?
If no, what is the reason? Did you feel you should? Why?
If yes, why you were motivated?
Did you feel supported?
If yes, what made you feel supported?
Did you have a place where you could meet others who could give you support?

10. Were there any group efforts to help the refugees?

What was the purpose of it? Who started it? Who joined? Was there any obstacles? Did any organizations help? What was your role? Do you feel part of that group?

11. Are you familiar with any psychosocial support programs/initiatives that targets refugees? What do you think of it?

Now I have final few general questions for you

12. How would you describe your mental wellbeing? (Happy, Coping, Depressed, Angry)

13. Any other comments you wanted to add?

This is the end of the interview, and I would like to thank you for your valuable contribution to this study.

Appendix 3: Paper 3, study 2: PARTICIPANT INFORMATION SHEET Project: Secondary Stressors Scale for refugees of conflict in Middle East

You are being invited to take part in a research study. Before you decide whether or not to take part, it is important for you to understand why the research is being done and what it will involve. Please take time to read the following information carefully.

The general purpose of the study is to explore the needs of refugees of conflict and their social relations with other refugees and host communities. You have been asked to participate in this study because you are a refugee of conflict in Jordan; you are 18 years or older; and you have lived in your country until you was displaced out of the country as a result of the armed conflict.

It is up to you to decide whether or not to take part. If you decide to take part you are still free to withdraw at any time and without giving a reason. If you decided to withdraw your participation after completing the questionnaire, please send an email to the researcher asking him to delete your data (BEFORE 1st of December 2016) and provide him with the date and time of your participation.

In some parts of the questionnaire, we will ask about sensitive issues. However, data collected through this questionnaire will be strictly used in a study that will be a major part of the researcher's PhD thesis along with academic publications based on that thesis.

The researcher will be happy to provide you with the results if you are interested.

All information collected will be encrypted and kept strictly confidential, and your participation will kept anonymous in all times.

If you have any questions about the study, please contact the researcher, Khalifah Alfadhli at: (Email) <u>khta20@sussex.ac.uk</u>, (mobile) +44 (0), Or the supervisor, Dr. John Drury at: J.Drury@sussex.ac.uk

This study has been approved by the Sciences & Technology Cross-Schools Research Ethics Committee (crecscitec@sussex.ac.uk). The project reference number is ER/KHTA20/4

University of Sussex has insurance in place to cover its legal liabilities in respect of this study

By clicking the button below to start the questionnaire, you confirm that you are; Above 18 years old; Have read and understood the information provided above; Consent to take part of this study. THANK YOU

Appendix 4: Paper 3, study 2: Online questionnaire Project: Secondary Stressors Scale for refugees of conflict in Middle East

We would be grateful if you could answer all the questions as honestly as possible. Thinking **of your experience** <u>after arriving in Jordan</u>, please tell us about your situation **focusing on the** <u>last month</u>: <u>I experienced</u>:

1- Losing a part of my usual income in Syria

None of my income $\begin{bmatrix} 1 & 2 & 3 & 4 & 5 \end{bmatrix}$ A lot of my income

2- Not having enough money to get staple survival foods

Always have enough money	1	2	3	4	5	Never have enough money

3- Not having enough money for health care (e.g. medicine/surgery)

Always have enough money	1	2	3	4	5	Never have enough money

4- High cost of living (e.g. rent, food, clothing & transportation)

Can easily afford	1	2	3	4	5	Cannot afford
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5- Being unemployed

Always get a job

1 2 3 4 5 Never got a job

6- Living in poor housing due to 'temporary' situation

None of the time	1	2	3	4	5	The whole
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7- Issues with physical condition of the house (e.g. maintenance)

None of the time $\begin{bmatrix} 1 & 2 & 3 & 4 \end{bmatrix}$

5 The whole time

8- Moving from one home to another (living in temporary accommodation)

time

at all

Never move	1	2	3	4	5	Always moving
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9- Pollution in the area I live in

None of the time	1	2	3	4	5	The whole time

10- Availability of physical health services

Always available	1	2	3	4	5	Never available

11- Availability of psychological health services

Always available	1	2	3	4	5	Never available
------------------	---	---	---	---	---	-----------------

12- Lack of water

Always	available
--------	-----------

3	4
	3

2

Never available 5

13- Availability of edu

Always available	1

ica	tion	1		
2	3	4	5	Nev

ver available

14- Poor quality of education

None of the time 1

5 The whole time 3 4

15- Feeling unsafe

None of the time

2	3	4	5	The whole time

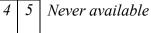
16- Lack of recreational activities.

1 2 3

1

1

Always available



17- Not receiving aid or services offered by nonprofit organizations.

Always receive it	1	2	3	4	5	I receive
-------------------	---	---	---	---	---	-----------

3

2

nothing

18- Not knowing about aid or services offered by nonprofit organizations

Always	know

5 Never know 4

19- Feeling loss of aspirations for the future

Always optimistic about future $\begin{bmatrix} 1 & 2 & 3 & 4 & 5 \end{bmatrix}$ Never optimistic about future	Always optimistic about future	1	2	3	4	5	Never optimistic about future
--	--------------------------------	---	---	---	---	---	-------------------------------

20- Consider relocate to different host country (western)

Never think of relocating	1	2	3	4	5	Always think of relocating
---------------------------	---	---	---	---	---	----------------------------

21- Feeling not adapting to life in Jordan

2

Very adapted	1	2	3	4	5	Not adapted at all

22- Being unable to make decisions regarding future events.

Very able 1

3 4 5 Not able at all

23- Lack of information about the new environment in Jordan (how to take the bus, where to buy specific things/food.. etc)

1	2	3	4

5 Always need to know it

24- Trust in official/organizations information

The whole time	1	2	3	4	5	None of the time

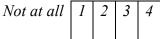
25- Situation requiring documentations where you don't hold (UNHCR & Jordanian security ID)

· ·						
Not at all	1	2	3	4	5	Very often

26- Going through the process of getting and renewing official documents (e.g. UNHCR registration & Jordanian ID)

Not at all	1	2	3	4	5	Very often
------------	---	---	---	---	---	------------

27- Threat of deportation (to Syria or refugee camps)



3 4 5 Very often

28- Hassle in roadblocks

Not at all	1	2	3	4	5	Very often
------------	---	---	---	---	---	------------

29- Working without a permit

Never work without permit	1	2	3	4	5	Always work without permit

30- How often do you feel abandoned (other refugees don't help each other)?

Never feel that 1 2 3 4 5 The whole time

2 3

1

31- How often do you feel other refugees are not acting responsibly?

Never feel	that

 4
 5
 The whole time

32- How often do you feel other refugees are too competitive/aggressive amongst themselves?

Never feel that	1	2	3	4	5	The whole time
-----------------	---	---	---	---	---	----------------

33- How often you feel not belonging to a strong social network (family/tribe/town)?

None of the time	1	2	3	4	5	The whole time
------------------	---	---	---	---	---	----------------

34- How often you feel relations of power within refugee community reproduce worst aspects of them?

None of the time

2	3	4	5	The whole time
2	5	7	5	The whole time

35- Have you experienced domestic violence (beaten by family members)?

None of the time	1	2	3	4	5	The whole time

36- Do you have relatives inside Syria?

1

None	1	2	3	4	5	Many

37- Do you have refugee relatives in other countries?

None	1	2	3	4	5	Many

1

38- Have you experienced verbal sexual harassment by other refugees?

Very	often
------	-------

5	Not at all

39- Have you experienced physical sexual harassment by other refugees?

Very often	1	2	3	4	5	Not at all

2

1

2 3

4

40- Have you experienced being verbally threatened by a Jordanian?

Very often

3 4 5 Not at all

41- Have you experienced being physically attacked by a Jordanian?

Very often	1	2	3	4	5	Not at all
------------	---	---	---	---	---	------------

42- Have you experienced discrimination in gaining access to services (e.g. other groups get access ahead of me unfairly)?

Many times	1	2	3	4	5	None of the time
------------	---	---	---	---	---	------------------

43- Have you experienced being insulted by a Jordanian person?

Many times	1	2	3	4	5	None of the time
------------	---	---	---	---	---	------------------

44- Have you experienced being exploited by a Jordanian person?

Very often	1	2	3	4	5	Not at all

To what extent do you agree or disagree with the following statements?

45- Jordanian people are trustworthy.

1

Disagree strongly

				e e
2	3	4	5	Agree strongly

46- Jordanian people try to take advantage of others.

Agree strongly

2	3	4	5	

Disagree strongly

47- Jordanian people act in an honest way 2

Agree	strongly
-------	----------

3	4	5	Disagree strongly

48- Jordanians think of me as low status

They don't think that $\begin{vmatrix} 1 & 2 & 3 \end{vmatrix}$ 5 They do think that 4

49- Jordanians think of me as a cheat

They don't think that 1 2 3 They do think that 4 5

50- Jordanians think of me as lacking morality

They don't think that	1	2	3	4	5	They do think that
-----------------------	---	---	---	---	---	--------------------

51- Jordanians think that Syrians are not trustworthy

They don't think that 1 2 3 4 5 They do think that

We need some demographic information about you

<u>Age?</u> (...) years . <u>Gender?</u> Male (), Female () <u>Marital status?</u> Married (), Single (), Divorced (), Widow () <u>How many children?</u> (...) <u>How many years you've been out of Syria?</u>

l year or less	years	years	lyears	5years
----------------	-------	-------	--------	--------

What is your highest educational qualification? (please put a \checkmark under the answer)

Read-and-	To primary	To secondary	High	College	Universitary	Graduate
write	level	level	school		level	studies

What was your previous occupation (in Syria)?

Professional (teaching, medicine, law etc.)	Clerical job	Manual labour	Unemployed	Housewife	Student

Which region do come from in Syria?

Damascus	Hamah	Homs	Deir ez-Zur	Ar Raqqah	Aleppo	Latakia	Idleb	Daraa	Al Hasakah

Appendix 5: Paper 4, study 2: PARTICIPANT INFORMATION SHEET Project: Role of shared social identity in psychosocial support among Syrian refugees in Middle East

You are being invited to take part in a research study. Before you decide whether or not to take part, it is important for you to understand why the research is being done and what it will involve. Please take time to read the following information carefully.

The general purpose of the study is to explore the needs of refugees of conflict and their social relations with other refugees and host communities, and their mental health. You have been asked to participate in this study because you are Syrian living in Jordan ; you are 18 years or older; and you have lived in your country until you was displaced out of the country as a result of the armed conflict.

It is up to you to decide whether or not to take part. If you decide to take part you are still free to withdraw at any time and without giving a reason. If you decided to withdraw your participation after completing the questionnaire, please contact the researcher asking him to delete your data (BEFORE the end of May 2017).

In some parts of the questionnaire, we will ask about sensitive issues. However, data collected through this questionnaire will be confidential and strictly used collectively and anonymously in a major part of the researcher's PhD thesis along with academic publications based on that thesis. The researcher will be happy to provide you with the results if you are interested. All information collected will be encrypted and kept strictly confidential, and your participation will kept anonymous in all times.

If you have any questions about the study, please contact the researcher, Khalifah Alfadhli at: (Email) khta20@sussex.ac.uk, (mobile) +44 (0), Or the supervisor, Dr. John Drury at: J.Drury@sussex.ac.uk

This study has been approved by the Sciences & Technology Cross-Schools Research Ethics Committee (crecscitec@sussex.ac.uk).

By clicking the button below to start the questionnaire, you confirm that you are; Above 18 years old; Have read and understood the information provided above; Consent to take part of this study. THANK YOU

Appendix 6: Paper 4, study 2: Online questionnaire

Project: Role of shared social identity in psychosocial support among Syrian refugees in Middle East

1. With focus on the last month? Have you:

a. Been able to c	oncentrate on wh	hat you're doing	?	1	1	_
Never	1	2	3	4	5	Very often
b. Lost much sle	ep over worry?					
Never	1	2	3	4	5	Very often
c. Felt you were	nlaving a useful	nart in things?				_
Never	1	2	3	4	5	Very often
d. Felt capable o	f making decisio	ns about things?	,			_
Never	<i>1</i>	<i>2</i>	3	4	5	Very often
e. Felt constantly	under strein?					
Never	<i>1</i>	2	3	4	5	Very often
б Г.14		1:00 14: 9	L	L		
f. Felt you could <i>Never</i>	n t overcome yo 1	2	3	4	5	Very often
. Deer alde te a		1 1				
g. Been able to e	njoy your norma	ii day-to-day act	ivities?			7
Never	1	2	3	4	5	Very often
h. Been able to fa	ace up to your pi	roblems?				
Never	1	2	3	4	5	Very often

i. Been feeling unhappy and depressed?

	r							
Never		1		2	3	4	5	Very often
j. Been losing co	onfidenc	e in vour	self?					
Never		1	5011.	2	3	4	5	Very often
k. Been feeling	reasonal	oly happy	, all	things consi	dered?			
Never		1		2	3	4	5	Very often
l. Been thinking	of your	celf as w	orthle	2009				
Never		1	51111	2	3	4	5	Very often
2. To what ext	tent do	agree w	vith t	he followi	ng statements	s?		
a. Refugees are	e all in a	a similar	situ	ation				
Strongly disag	ree	1		2	3	4	5	Agree strongly
Strongly usug	ree	1		-	5		5	
b. All refugees	face sa	ume chal	lenge	es and prob	olems			
Strongly disag	ree	1		2	3	4	5	Agree strongly
								1
c. All refugees	feel sin	nilar suf	ferin	g				
Strongly disag	ree	1		2	3	4	5	Agree strongly
								1
d. All refugees	face si	milar ch	allen	ges during	adapting			
Strongly disag	ree	1		2	3	4	5	Agree strongly

3. With focus on the	last month,	have you ex	perienced?			
a.High cost of living (e.g. rent, foo	d, clothing &	transportati	on)		
Never	1	2	3	4	5	All the time
b. Not having enough	money to ge	t stable survi	val foods			
Never	1	2	3	4	5	All the time
c. Being unemployed	_					
Never	1	2	3	4	5	All the time
d. Having enough mo	ney for healt	h care (e.g. n	nedicine/surg	gery)		
Never	1	2	3	4	5	All the time
4. With focus on the	last month,	have you ex	perienced?			
a. Receiving aid	or services o	ffered by nor	n-profit organ	nizations.		
Never	1	2	3	4	5	All the time
b. Not knowing about	aid or servic	es offered by	nonprofit o	rganizations		_
Never	1	2	3	4	5	All the time
c. Lack of recreationa	l activities.					
Never	1	2	3	4	5	All the time
5. To what extent do a. We felt capable of a	• •		0	ents?		
-	_				_	٦
Disagree strongly	1	2	3	4	5	Agree strongly
b. We felt we were ab	le to organiz	e ourselves to	o improve ou	r situation		_
Disagree strongly	1	2	3	4	5	Agree strongly

c. We felt somewhat in control of things, despite being refugees

Disagree strongly	1	2	3	4	5	Agree strongly
-------------------	---	---	---	---	---	----------------

6. To what extent do agree with the following statements?

a. I came to expect other refugees to be cooperative

Disagree strongly	1	2	3	4	5	Agree strongly
b. It became the norm	for other ref	ugees to be s	supportive of	f my actions		
Disagree strongly	1	2	3	4	5	Agree strongly
c. I realized that other	refugees wo	uld give helj	p if I asked fo	or it		
Disagree strongly	1	2	3	4	5	Agree strongly
7. To what extent do	agree with t	the following	g statements	s?		
7. To what extent do a. I felt at one with the	e refugees are	ound me			[7
	0		g statements 3	s? 4	5	Agree strongly
a. I felt at one with the Disagree strongly	e refugees are	ound me			5	Agree strongly
a. I felt at one with the Disagree strongly	e refugees are	ound me			5	Agree strongly Agree strongly
 a. I felt at one with the <i>Disagree strongly</i> b. I identified with the 	e refugees are	ees	3	4		
 a. I felt at one with the <i>Disagree strongly</i> b. I identified with the <i>Disagree strongly</i> 	e refugees are	ees	3	4		
 a. I felt at one with the <i>Disagree strongly</i> b. I identified with the <i>Disagree strongly</i> c. I felt unity with oth 	e refugees are 1 e other refuge 1 er refugees 1 er refugees 1	2 ees 2 2	3	4	5	Agree strongly

7. With focus on the last month,

a.I participated in groups that organized to locate supplies etc.

never once twice three time four or mo	re
--	----

b. I worked together with other refugees for the good of others

never	once	twice	three time	four or more
-------	------	-------	------------	--------------

c. I acted together with other refugees to improve our conditions

never once twice	three time	four or more
------------------	------------	--------------

d. I participated with others in helping other refugees to move

never once	twice	three time	four or more
------------	-------	------------	--------------

e. I joined in contributing to funds help with funerals and/or weddings

never once	twice	three time	four or more
------------	-------	------------	--------------

8. With focus on the last month,

a. I shared some of my things with other refugees

never once twice three time four or more	
--	--

b. I helped new refugees by giving them information

never once	twice	three time	four or more
------------	-------	------------	--------------

c. I gave other refugees advice about services

never once	twice	three time	four or more
------------	-------	------------	--------------

9. With focus on the last month,

a. I gave emotional support

never once twice	three time	four or more
------------------	------------	--------------

b. I showed respect to others

never	once	twice	three time	four or more
-------	------	-------	------------	--------------

c. I showed concern for other's needs'

never	once		twice	three	time	four or more
. With focus on the last month, have you experienced? a. Being						
physically attacke		•	perienceu	a. Denig		
Never	1	2	3	4	5	All the time
b. Physical sexual ha	rassment by of	ther refugees	5?	1		

Never 1 2 3 4 5 All the time c. Verbally threatened by a Jordanian? Never 1 2 3 4 5 All the time

d. Verbal sexual harassment by other refugees?

	Never	1	2	3	4	5	All the time
--	-------	---	---	---	---	---	--------------

11. With focus on the last month? Have you experienced:

a. Little interest or pleasure in doing things

Never	few days	more than half of days	almost everyday
-------	----------	------------------------	-----------------

b. Feeling down, depressed or hopeless

Never few da	s more than half of days almost everyda	v
--------------	---	---

c. Trouble falling or staying asleep, or sleeping too much

Never	few days	more than half of days	almost everyday
-------	----------	------------------------	-----------------

d. Feeling tired or having little energy

Never	few days	more than half of days	almost everyday
-------	----------	------------------------	-----------------

e. Poor appetite or overeating

Never	few days	more than half of days	almost everyday
eling bad about yoursel	f – or that you are a failur	e or have let yourself or your fa	amily down
Never	few days	more than half of days	almost everyday

Never	few days	more than half of days	almost everyday
-------	----------	------------------------	-----------------

h. Moving or speaking so slowly that other people could have noticed, or the opposite – being so

fidgety or restless that you have been moving around a lot more than usual

Never	few days	more than half of days	almost everyday
-------	----------	------------------------	-----------------

i. Thoughts that you would be better off dead or of hurting yourself in some way

Never	few days	more than half of days	almost everyday
-------	----------	------------------------	-----------------

12. To what extent do agree with the following statements?

a. Jordanian people try to take advantage of others.

Disagree strongly	1	2	3	4	5	Agree strongly				
b. Jordanian people are trustworthy.										
Disagree strongly	1	2	3	4	5	Agree strongly				
c. Jordanians think that Syrians are not trustworthy										
Disagree strongly	1	2	3	4	5	Agree strongly				

13. With focus on the last month? How often you:

a. felt upset beca	ause of somethi	ng that happene	ed unexpectedly	/		
Never	1	2	3	4	5	Most of the time
b. felt that you v	vere unable to c	ontrol the impo	ortant things in	your life		_
Never	1	2	3	4	5	Most of the time
c. felt nervous a	nd "stressed"?					
Never	1	2	3	4	5	Most of the time
d. felt confident	about your abil	ity to handle yo	our personal pro	oblems?		
Never	1	2	3	4	5	Most of the time
e. that things we	ere going your v	vay?				
Never	1	2	3	4	5	Most of the time
f. found that you	1 could not cope	e with all the thi	ings that you ha	ad to do		
Never	1	2	3	4	5	Most of the time
g. been able to c	control irritation	s in your life?				
Never	1	2	3	4	5	Most of the time
h. felt that you v	were on top of tl	nings?				
Never	1	2	3	4	5	Most of the time
i. been angered	because of thing	gs that were out	side your contro	ol?		
Never	1	2	3	4	5	Most of the time
j. felt difficultie	s were piling up	so high that vo	ou could not ove	ercomethem?		
Never	1	2	3	4	5	Most of the time

a. felt upset because of something that happened unexpectedly?

We need some demographic information about you, please

<u>Age</u>? (...) years .

 <u>Gender</u>? Male
 (), Female ()

 <u>Marital status</u>?
 Married (), Single (), Divorced (), Widow ()

 <u>How many children</u>?(...)

 <u>How many years you've been out of Syria</u>?

1 year or less 2yea	urs 3years 4y	years 5years or more
---------------------	---------------	----------------------

What is your highest educational qualification? (please put a **V** under the answer)

Read-and-w rite	To primary level	To secondary level	High school	College	Universitary level	Graduate studies

What was your previous occupation (in Syria)?

Professional (teaching, medicine, law etc.)	Military	Clerical job	Manual labour	Unemployed	Housewife	Student

Which region do come from in Syria?

Damascus	Hamah	Deir ez- Zur	Ar Raqqah	Aleppo	Latakia	Idleb	Daraa	Al Hasakah

Which country do you live in now? (please put a **V** under the answer)

Jordan	Lebanon	Turkey	Egypt	Other

Do you live in a refugee camp? Yes (), No ()

Appendix 7: Paper 4, study 1: Paper questionnaire

De	ear Participant,			
ea foi ma ifc	his study will examine if and how the other support in order to cope were by displaced persons. Please for ark the best answer fit to you. Please primation about your identity detail uportant thing is that describe your	with the practical and cus on the last more se use (X) to mark s. There is no right	nd psychological stress nth and read carefully a Please do not mention t or wrong answer to th	ors of being all items then h any
			Meltem Gu	ıler
			Cukurova U Psychology	University / Department
	ease focus on the last month and inc e following scale:	licate how stressful	the following have beer	n to you, using
		Not at all stressful	Somewhat stressful	Very stressful
1	Not having enough money to pay for things my family needs	1	2	3
2	Not feeling safe in my home	1	2	3
3	Not feeling healthy	1	2	3
4	Not being able to find work	1	2	3
5	Not feeling safe walking around outside of my home	1	2	3
6	Not feeling happy with my family	1	2	3
7	Not being able to afford medicines I need	1	2	3
8	Problems with my teeth	1	2	3
9	A family member being sick	1	2	3
1 0	Feeling lonely	1	2	3
1 1	Feeling like people don't give me enough support	1	2	3
1 2	Being beaten by a family member	1	2	3
1 3	Financial problems	1	2	3
1 4	Overcrowding in my house	1	2	3
1 5	The physical condition of my house	1	2	3
1 6	Conflict in my home	1	2	3
1 7	Missing relatives who live far away	1	2	3
1 8	The security situation in Turkey	1	2	3
1	Not having anyone I can talk to about what is in my heart	1	2	3

2 0	Air pollution	1	2	3	
2 1	Roadblocks	1	2	3	
2 2	Not having children of my own	1	2	3	
	Having too many children in the house	1	2	3	
	Being unable to provide for my children's needs	1	2	3	
2 5	Being unable to read or write	1	2	3	
2 6	Not owning my own home	1	2	3	

Please focus on the last month and indicate whether you agree or disagree with following statements.

					totally disagree	disagre e	partially disagree	neutral	partially agree	agre e	totall y agree	
1	I have come to expect other refugees to be cooperative				es 1	2	3	4	5	6	7	
2	It has become the norm for other refugees to be supportive of my actions				1	2	3	4	5	6	7	
3	Other refugees will give help if I ask for it			sk 1	2	3	4	5	6	7		
1	I feel at one with the refugees around me			1	2	3	4	5	6	7		
2	2 I identify with the other refugees			1	2	3	4	5	6	7		
3	I feel unity with other refugees			1	2	3	4	5	6	7		
4	I feel that other refugees are like me				e 1	2	3	4	5	6	7	
		_				•	•	•				

Please focus on the last month and indicate whether you took part in the following activities.

				Never	Not much	Sometim es	Yes, a number of times	A lot		
1	I shared resources (e.g other refugees	vith								
2	2 I showed concern for others' needs									
3	I gave other refugees e support									
4	I helped new refugees them information	5								
5	I gave other refugees a services	advice abo	out							
6	I gave other refugees p support									
1	I have participated in g organized to locate sup									

2	2 I have worked together with other refugees for the good of others			
3	3 I have acted together with other refugees to improve our conditions			
4	4 I have participated with others in helping other refugees to move			
5	5 I have joined in contributing to funds help with funerals and/or weddings			

Please focus on the last month and indicate whether you agree or disagree with following statements.

					totally disagree	disagre e	partially disagree	neutral	partially agree	agre e	totall y agree
1	We feel capable of accessing medical services				1	2	3	4	5	6	7
2	We feel v ourselves				1	2	3	4	5	6	7
3	We feel s things, de				1	2	3	4	5	6	7
	~ .										
1	Gender				Man			Wom	ian		
2	Age										
3	Length o (months)		oeing a r	efugee							
4	If you ha	ve chilo	dren, ho	w many?	yes	yes no How M		How Ma	any		
5	How mai	ny relat	ives in y	our house	None		.1-2		.3-4		
6	Region o	f Syria	you can	ne from							
	Damasc us	Hama h	Homs	Deir ez- Zur	Ar Raqqah	Aleppo	Latakia	Idleb	Daraa	Al Ha	asakah
7	7 Previous job when in Syria										
	Professi (teachin medicin law etc.	g, e,	Militar y	clerical job	manual labour		unemployed		housewif e student		nt
8	Educatio	n									
Illiterate read-and-v		nd-write	to primary level	to secondary level		college university le		evel grad stud			

Please focus on the last month in answering the following questions.											
						Not at all				Often	
1	Have you nervous?	been v	ery anxio	ous an	d	1	2	3	4	5	
2	Have you that nothi					1	2	3	4	5	
3	Have you	felt cal	lm and p	eacefu	ıl?	1	2	3	4	5	
4	Have you					1	2	3	4	5	
5	Have you felt downhearted and blue?					1	2	3	4	5	
1	In general, would you say your physical health is?				Poor	Fair	Good	Very Good	Excelle	ent	
2	Have you following year?					Heart problems	Insomni a	Headache s	Back pain	Frequent colds	flu
						Diabetes	Cancer	Asthma	Hypertensi on	Gastrointe 1 problems	
3	Compare with)	ed to a g	year ago	, how	woul	d you rate	your cur	rent health	n? (tick each	one you ag	gree
	Much better now than one year ago										
	Some	ewhat b	etter now	v than	one						
		/ear ago About the same as one year ago									
	Some year ago	Somewhat worse now than one									
	Much worse than one year ago										
Pl	ease tell us	s about	the qua	lity of	f your	· contact w	ith Turki	ish people			
						None				Quite a fe them	
1	To what extent have you been verbally abused by a Turkish person in the near past?				1	2	3	4	5		
2	To what extent have you been verbally insulted by a Turkish person in the near past?					1	2	3	4	5	
3	To what extent have you been					1	2	3	4	5	
4	To what extent have you been					1	2	3	4	5	
.							•		_		
Pl	ease tell us	s about	the qua	lity of	f your	· contact w	ith other	refugee pe	ople		
						None				Quite a fe them	

1	To what extent have you been verbally abused by a refugee in the near past?	1	2	3	4	5	
2	To what extent have you been verbally insulted by a refugee in the near past?	1	2	3	4	5	
3	To what extent have you been verbally threatened by a refugee in the near past?	1	2	3	4	5	
4	To what extent have you been physically abused by a refugee in the near past?	1	2	3	4	5	
1	How many of your closest friends are Turkish?	1	2	3	4	5	
2	How often you visited your Turkish friends in their home?	1	2	3	4	5	
3	How often your Turkish friends visited you in your home?	1	2	3	4	5	
1	How many of your closest friends are refugees?	1	2	3	4	5	
		Not at all				Often	
2	How often have you visited your refugee friends in their home?	1	2	3	4	5	
3	How often have your refugee friends visited you in your home	1	2	3	4	5	