https://prism.ucalgary.ca

The Vault

Open Theses and Dissertations

2014-07-21

Interrupted Journeys: The Experiences of Refugee Women in Counselling

Djuraskovic, Ivana

Djuraskovic, I. (2014). Interrupted Journeys: The Experiences of Refugee Women in Counselling (Doctoral thesis, University of Calgary, Calgary, Canada). Retrieved from https://prism.ucalgary.ca. doi:10.11575/PRISM/26618

http://hdl.handle.net/11023/1652

Downloaded from PRISM Repository, University of Calgary

UNIVERSITY OF CALGARY

Interrupted Journeys: The Experiences of Refugee Women in Counselling

by

Ivana Djuraskovic

A THESIS

SUBMITTED TO THE FACULTY OF GRADUATE STUDIES IN PARTIAL FULFILMENT OF THE REQUIREMENTS FOR THE DEGREE OF DOCTOR OF PHILOSOPHY

GRADUATE PROGRAMS IN EDUCATION

CALGARY, ALBERTA

June 2014

ABSTRACT

Although the mental health of refugees has been a focus of researchers for some time now, refugee transitions and refugee counselling are underrepresented and often neglected topics in the counselling literature in Canada. The practice of multicultural therapy with refugees continues to focus on a medical model and psychological issues that refugees face in pre-, trans-, and post –resettlement contexts. Within the current landscape of refugee counselling, very little research exists about refugees' counselling needs as conceptualized from refugees' perspective. This heuristic inquiry explored the stories of 6 refugees and their experiences of counselling in Canada. Based on the stories of the 6 co-researchers, 4 main categories emerged: (a) counselling process, (b) counsellor factors, (c) therapeutic relationship, and (d) client outcomes. Contributions to the academic and professional literature are highlighted. Implications and recommendations for future research and practice are identified and discussed.

In response to the growing need to identify the effective counselling practices for refugees, this heuristic research focused on exploring the refugees' lived experiences of counselling. This research also focused on capturing refugees' voices about the factors that contribute to successful/unsuccessful counselling engagement and outcomes. It aimed to increase understanding of how refugees' pre-, trans-, and post-migration experiences influence their resettlement and adaptation, and subsequent counselling needs.

Keywords: refugees, refugee resettlement, refugee counselling, refugee therapy

ACKNOWLEDGMENTS

I would like to begin my acknowledgments by recognizing Dr. Nancy Arthur for her knowledge, expertise, and amazing support. Together, we embarked on many eye-opening journeys that resulted in publications and numerous conference presentations to contribute to the advancements in refugee counselling, multicultural counselling, and social justice. Thank you, Dr. Lisa Panayotidis, for challenging the corners of my mind that I did not know existed. The philosophical foundation you have given me is priceless. Thank you, Dr. Dave Este, for recognizing my true potential and always being supportive of my work. A special thank you to Drs. Kuo and Scott for joining my committee and helping me grow in numerous ways.

Additionally, I would like to thank Drs. Kevin Alderson, Valerie Prueger, and Sharon Robertson for joining my committee during my candidacy examination. You have supported me in numerous ways and helped me grow both as a person and a professional. A special acknowledgment is warranted for Drs. Suzie Bisson, Robert Roughley, Jeff Chang, and Jean Pettifor for shining their light on my journey, providing endless support, and priceless friendship.

Thank you Edith Mandeville for always having my back and making me feel like a human being. Without you, many new learnings would have been impossible. To my most amazing cohort: Dr. Reana Saraceni, Dr. Murray Anderson and soon to be Dr. Emily Doyle – you were the best PhD gang one could wish for. A special thank you to soon to be Dr. Sandra Dixon for brainstorming with me and helping me build my creative synthesis.

I would like to thank my parents, Jagoda and Krunoslav Silic, for always believing in me, even when I did not. To my brother, Damir, thank you for being you. To my son, Dusan Djuraskovic, thank you for reminding me why life is worth living. To my grandpa who I know would have been proud of me and who, I am certain, is looking over me from up above – I love

you and I miss you. To the love of my life, Branko Strbac, thank you for being my anchor in many storms we encountered together.

Finally, a very warm and special thank you is extended to the 6 incredible women who courageously shared their experiences and trusted me with their narratives. Thank you from the bottom of my heart. Without you, this work would not have happened.

DEDICATION

To Branko and Dusan – you are the loves of my life. You inspire me and because of you everything seems possible. I love you fürimer.

TABLE OF CONTENTS

ABSTRACT	II
ACKNOWLEDGMENTS	III
DEDICATION	V
TABLE OF CONTENTS	VI
LIST OF TABLES	IX
List of Figures	X
CHAPTER ONE: INTRODUCTION	1
OUTLINE OF THE CHAPTER	
DEFINITION OF KEY TERMS	
Refugees	
Resettlement	
Adaptation	
Culture-Infused Counselling	
THE SNAPSHOT OF MY STORY	
The Question	
POTENTIAL SIGNIFICANCE OF THE STUDY	
Significance for Practice	
Significance for Theory	
Significance for Policy	
Social Significance	
Personal Significance SUMMARY	
SUMMARY	12
CHAPTER TWO: LITERATURE REVIEW	13
RATIONALE FOR THE CHAPTER	13
Refugees	15
COMMON CONCERNS IN PROCESS OF RESETTLEMENT AND ADAPTATION	16
FOUR COMMON CONCERNS EXPERIENCED BY REFUGEES	17
Forced Exile	18
Trauma and Torture	19
Acculturation	21
Intersecting Identities	24
Refugees Counselling Frameworks	
Multi-Level Model (MLM) Approach to Psychotherapy for Refugees	27
Culture-Infused Counselling	
Dialogical Refugee Counselling.	33
Just Therapy	
Critical Evaluation of Refugee Counselling Frameworks	
ACCESS TO CULTURALLY-APPROPRIATE COUNSELLING SERVICES	
Cultural Barriers	
Language Barriers	42

Counsellor-Client barriers	43
Summary	43
CHARTER THREE METHODI OCV	45
CHAPTER THREE: METHODLOGY	
Methodology	45
Modernism and Postmodernism in Qualitative Research	
A Personal Connection to Heuristic Inquiry	
HEURISTIC INQUIRY	
Seven Processes of Heuristic Inquiry	
Six Phases of Heuristic Inquiry	
Limitations of Heuristic Inquiry	
Situating Myself Within Heuristic Inquiry	
Summary	
THE RESEARCH DESIGN	
The Beginning	
Site Selection and/or Population selection	
The Co-Researchers	
My Role as a Researcher	
Data Collection	
Data Analysis	
Trustworthiness	
ETHICAL CONSIDERATIONS	
Respect of Dignity of Co-researchers and Integrity in Research	
Summary	
CHAPTER FOUR: THE STORIES	71
IVANA: THE ART OF LETTING GO	71
Lamija: The Art of Trust	
Andrea: The Art of Self-Creation	
Fatima: The Art of Healing	
MILIJANA: THE ART OF RECLAIMING	104
LOLITA: THE ART OF SURVIVAL	111
NERA: THE ART OF WINNING	118
CHAPTER FIVE: DESCRIPTION OF FINDINGS	125
THEMATIC ANALYSIS	
CATEGORY ONE: THE COUNSELLING PROCESS	
Initial Counselling Contact	
The subsequent Counselling Experience.	
CATEGORY TWO: COUNSELLOR FACTORS	
Personal Characteristics	138
Professional Competence	143

Ethical Bond	148
Core Therapeutic Factors	151
Cultural Influences	
CATEGORY FOUR: CLIENT OUTCOMES	158
Emotional Catharsis	159
New Meaning	
Personal Change	164
COMPOSITE DEPICTION	165
Creative Synthesis	172
Creative Synthesis: I Have Never Been on an Airplane Before	173
CHAPTER SIX: DISCUSSION OF FINDINGS AND CONCLUSION	183
RESEARCH QUESTIONS AND OBJECTIVES	183
CONTRIBUTIONS OF RESEARCH FINDINGS TO THE LITERATURE	
Category 1: Counselling Process	185
Category 2: Counsellor Factors	
Category 3: Therapeutic Relationship	
Category 4: Client Outcomes	197
IMPLICATIONS FOR COUNSELLING PSYCHOLOGY PRACTICE	
The Role of Common Therapeutic Factors in Refugee Counselling	201
Culture-Infused Counselling Competence	
Assessment	206
Counsellor Education	208
Promotion of Social Justice	212
DELIMITATIONS OF THIS RESEARCH STUDY	214
Sample Issues	215
Researcher's Reflexivity	
Representation of Researchers' Experiences	217
Diversity Issues	
SUGGESTIONS FOR FUTURE RESEARCH	
Conclusion	220
References	222
APPENDIX A: SAMPLE RECRUITMENT NOTICE	
APPENDIX B: SNOWBALL SAMPLING TEXT	
APPENDIX C: SAMPLE INTERVIEW GUIDE	
APPENDIX D: INFORMED CONSENT	
APPENDIX E: OATH OF CONFIDENTIALITY (TRANSCRIBER)	254

LIST OF TABLES

TABLE 1: CO-RESEARCHERS' DEMOGRAPHIC INFORMATION	61
TABLE 2: CATEGORIES AND SUB-CATEGORIES	126

LIST OF FIGURES

FIGURE 1: CATEGORY 1 - THE COUNSELLING PROCESS	127
FIGURE 2: CATEGORY 2 - COUNSELLOR FACTORS	138
FIGURE 3: CATEGORY 3 – THERAPEUTIC RELATIONSHIP	148
FIGURE 4: CATEGORY 4 – CLIENT OUTCOMES	159
FIGURE 5: REFUGEE COUNSELLING PROCESS	167
FIGURE 6: WHAT COUNSELLORS NEED TO KNOW	210

CHAPTER ONE: INTRODUCTION

The world has witnessed endless wars, civil conflicts, and inhumane forms of violence towards individuals from diverse countries and cultures. Unexpected interruptions, due to violence and forced exile, are experienced in the lives of many refugees (Arthur, Merali, & Djuraskovic, 2010; van der Veer, 1992). For example, Eisenbruch, de Jong, & van de Put (2004) found that over 21 million international refugees are represented worldwide. Many refugees continue to live in poor and difficult conditions such as refugee camps and detention centres. Many refugees have to escape the horrific and traumatic circumstances (e.g., civil wars, political persecution, ethnic cleansing). A permanent home in Canada represents a journey to a different life, away from the lives they once knew. Although the majority of refugees successfully resettle and adapt to the new life in Canada, many continue to struggle and require counselling to help them with the challenges common to the pre-, trans-, and post-migration process (Djuraskovic & Arthur, 2009).

The mental health of refugees has been a longstanding focus of researchers (Bemak, Chung, & Pedersen, 2003; Thapa & Hauff, 2005). Most studies conducted about refugee mental health focus on exploring the effects of trauma on refugees' post-migration adjustment and the incidence of psychiatric disorders and psychological difficulties for this population (Davidson, Murray, & Schweitzer, 2008; Thapa & Hauff, 2005). However, relatively little attention has been paid in research to refugees' experiences of counselling, and what leads to favourable counselling outcomes from their perspective.

The lack of appropriate counselling services for refugees is not a new problem. For decades, refugees have been labelled as vulnerable individuals who are marginalized, mistreated, and restricted by mental health systems that are not tailored to their needs (Silove, 2002). Recent

wars and civil conflicts have caused refugees to experience multiple traumas and losses, and greater challenges with resettlement and adaptation (Wilson, 2004). The nature of forced displacement calls for development of specialized counselling services, and creation of culturally-relevant counselling programs. Unfortunately, refugee hardships are either overestimated (Silove & Ekblad, 2002; Volkan, 2004) or inadequately addressed due to issues of access and culturally-responsive allied health services (Arthur et al., 2010). The needs of refugees are misunderstood or neglected due to the lack of knowledge and awareness to unique concerns that refugees experience in the process of resettlement and integration (Djuraskovic & Arthur, 2009). Counsellors may expect to provide services to refugees, even when counselling refugees is not their main area of focus (Arthur et al., 2010).

This research and the resulting dissertation is the narrative of my experience of counselling. It is also a collection of unique stories of six other refugees, who like me, experienced counselling, and ultimately re-created new meaning from their experiences. It is my hope that this dissertation will help illuminate refugees' experiences of counselling, provide a space for refugees to narrate their counselling journeys, and help to create a story of how counselling is viewed through their eyes.

Outline of the Chapter

The overarching goal of this chapter is to provide a brief introduction of refugee counselling, and definitions of key terms relevant to refugees' experiences of counselling. The snapshot of my story of being a refugee in counselling, as well as how I arrived at my research questions are also introduced. Additionally, a discussion of potential significance of this research study is offered. The framework for this chapter is divided into following sections: (a) definitions of key terms, (b) the snapshot of my story, and (c) potential significance of the study.

Definition of Key Terms

The terms that I believe are the most relevant to my discussion of refugees' experiences of counselling in this dissertation are: (a) *refugees*, (b) *resettlement*, (c) *adaptation*, and (d) *culture-infused counselling*. The purpose of this section is to familiarize readers with these terms and provide clarity. Each term will be defined in turn.

Refugees

1951, the United Nations Geneva Convention adopted the following definition of refugee:

... is any individual who owing to the well-founded fear of being persecuted for reasons of race, religion, nationality, membership of particular social group or political opinion, is outside of the country of his[her] nationality and is unable or, owing to such fear, is unwilling to avail him[her]self of the protection of that country; or who, not having a nationality and being outside the country of his[her] former habitual residence as a result of such events, is unable or owing to such fear, is unwilling to return. (United Nations High Commissioner for Refugees, 1951, p. 16)

In response to global humanitarian crisis in the 1990s, this definition has been criticized for being outdated and unhelpful for individuals who experience civil conflicts, organized violence, and other forms of political, economic, and social aggressions (Bemak & Chung, 2002; Millbank, 2000). Despite attempts to expand the definition of refugee to include individuals affected by the abovementioned factors (Allen, Vaage, & Hauff, 2006), the narrow Geneva Convention description is still used and interpreted by the majority of resettlement countries as the only universal criteria for determining the refugee movement and resettlement (Millbank, 2000).

Adopting the Culture-Infused Counselling model (Arthur & Collins, 2010a), I move to expand this definition to reflect multiple cultural and social identities and worldviews. Thus, in this dissertation, I consider the term *refugee* to elicit the following meanings: (a) refugees are individuals who come from diverse contexts; (b) refugees are unable to return to their countries of origin; (c) cultural transitions of refugees are influenced by multiple personal and social constructs including gender, age, sexual orientation, ethnicity, social class, and religious affiliation; and, (d) the counselling concerns of refugees are complex and unique.

Resettlement

Contrasting perspectives in the literature challenge a unified definition of resettlement. In general, *resettlement* refers to the acclimatization and early adaptation processes (Gray & Elliot, 2001). *Resettlement* has also been defined as the process during which refugees focus on meeting their basic needs and attempt to use their existing skills to negotiate their new environment and establish physical and psychological safety (Bemak & Chung, 2002). In this dissertation, the term *resettlement* refers to the negotiation process between refugees and the receiving countries, during which refugees become aware of the new environment and learn to locate and utilize social supports necessary for successful adaptation (Simich, 2003).

Adaptation

Within the counselling literature, adaptation in relation to refugees has multiple meanings. Berry (1997, 2005, 2006a) defines *adaptation* as the relatively stable changes that occur in an individual or group in response to demands of both intrapersonal and external environments. Adaptation is a complex and multifaceted process for refugees that changes as the interaction between refugees and receiving countries evolves (Arthur et al., 2010). In this dissertation, *adaptation* is regarded as the complex and ongoing process that continuously

evolves over time and is historically and contextually dependant (Arthur et al, 2010; Navas, Sánchez, Pumares, & Frenández, 2005).

Culture-Infused Counselling

As Canada welcomes greater numbers of culturally diverse individuals, the importance of recognizing the constraints of traditional counselling approaches becomes critical to deconstructing barriers to culturally responsive services for refugees. In this dissertation, culture-infused counselling is defined as "conscious and purposeful infusion of cultural awareness and sensitivity into all aspects of the counselling process and all other roles assumed by the counsellor or psychologist" (Arthur & Collins, 2010a, p. 18). Culture-infused counselling encourages counsellors to consider the potential influences of culture as central components within the lived experiences of both clients and counsellors. Such consideration advances the recognition of multiple personal, social, and systemic influences in the lives of all individuals, as well as the importance of multiple cultural influences in the provision of culturally-responsive counselling (Arthur & Collins, 2010a).

The Snapshot of My Story

If setting out on a journey is a central aspect of human experience, what are the motivations? (Smith, 1999, p. 1)

I often wondered why we embark on challenging, difficult, and painful journeys. Is it to find answers to our suffering? Is it to understand our experiences and create new meanings? Or is it simply because setting out on journeys is an important part of human existence? Human beings are always on a journey; however, sometimes those journeys are far from being pleasant, romantic, or exotic (Smith, 1990). For me, the journey of understanding my own experience of being a refugee in counselling has been tumultuous, sad, difficult, and somewhat rewarding.

Smith (1999) calls journeying "a meditation on leaving home and coming home" (p. 1).

Over the years, I have left home and came back many times. Such personal and private departures led me to counselling twice in my life and, for me, going to counselling most certainly represented losing a home and finding it again. It required me to re-visit my past, re-create my sense of self, re-acculturate within multiple realities I live in, and integrate my experiences in order to re-author my story and establish a preferred way of being.

I began my counselling journey in 2004 because I felt an intense incongruence between my personal and professional identities. After a lengthy deliberation with myself, I decided to call a local counselling agency and book a session with a counsellor. I was in the midst of completing the research requirements for my Master's thesis and I found that revisiting my refugee journey was becoming extremely challenging. I feared that if I did not address my struggles in counselling, I would not be able to do my work as a counsellor anymore. I found myself hurt, restless, and lost in my refugee clients' stories. Their stories became my story, and I could no longer distinguish their and my struggles. I knew that I needed to tell my story to someone who would not judge me and who would listen. Unfortunately, the counsellor that I was assigned to was cold, guarded, conservative, and not open to listening to what I needed to say. By the end of the first session, I received a diagnosis of low self-esteem. I was crushed. How could I have received a label after just one session? I returned one more time to see my counsellor and after that I have never set my foot in her office again. The very same night after my last session I wrote in my journal:

Decision to go to counselling was long and stressful one. I don't think I was affected by the taboo of counselling. I was struggling with the fear of how to walk into the counselling agency and begin telling my story. Maybe this has nothing to do with having a conservative and senseless counsellor but with the process that took place during those two sessions. The process was more than intense and painful for me. To sit in front of another human being and try to disclose the most private details of my experience, only

to realize that my words were disappearing into empty space, was horrific. How can I talk about my pain if the person sitting in front of me is preoccupied with categorizing me according to some pre-approved and prescribed norm of what it means to function in a healthy way in this society? Maybe successful counselling is yet another myth...maybe I am not cut out to be neither a client nor counsellor...I will never return to counselling again.

(Journal entry, November 14, 2004)

It took me six years to find my way back into the counselling office. By 2010, I became an expert in avoiding my refugee experiences. I often lost myself in my work not wanting to acknowledge that I was secretly hurting. The refugee identity I developed remained in the background and knocked on my doors every so often. I began personalizing the stories of my refugee clients and experiencing an intense and treacherous anger that was tearing my soul apart. I was homesick, exhausted, and felt like I was slowly dying inside. Although I vouched never to become a client in counselling again, I knew that my refugee story needed to be told. After numerous sleepless nights, and occasional painful dreams (at times when I could actually close my eyes and sleep) I re-considered my decision, and once again, I booked an appointment with a counsellor. Although shaken to my core, I entered counselling on my own free will as a last resort in hope that I would once again find a new way of interpreting my refugee experiences, and re-build my personal, academic, and professional integrity. Having an opportunity to re-tell my story in a safe environment to a person who took time to understand my point of view with all its cultural and historical specificity brought new insights and knowledge into my life, and allowed me to accept myself as a person, professional, and most of all – a refugee. What evolved was a new learning and re-creation of my reality in which my personal experiences of being a refugee and being in counselling are now situated within a new and preferred way of being.

A detailed narrative about my counselling experiences is provided in Chapter 4. It was neither easy nor pleasant to compose; however, it was necessary to help me understand my own counselling process. My hope is that it will provide the readers with an understanding of my inner struggle and the whirlpool of experiences that have guided me on my journey. After all, our personal stories shape our visions and interpretations of the world in which we live.

The Question

I never could pinpoint whether the research question found me or I found the research question. Deep down inside, I always had a yearning to understand refugees' experiences of counselling. After all, I dedicated my entire professional career to helping refugees. After the unfortunate encounter with my first counsellor, I realized that the question – *What is the experience of counselling for refugees?* – suddenly gained personal significance and captured my attention to the point of lingering in almost every aspect of my life. Nevertheless, I failed to acknowledge the influence that this question had on me, and I ignored it. I ignored it for almost six years until it finally re-emerged during my preparation to write my dissertation proposal.

Having the question re-emerge, of course, was not enough. I needed to select a research methodology that would help me to answer it. Not wanting to reflect on the tremendous impact that the research question had on me, I carelessly chose phenomenology (e.g., Giorgi, 1985; Moustakas, 1994) as the most appropriate research method. Although I never wanted to admit that such decision was far from being wise, I am now thankful to my doctoral committee and my supervisor for encouraging me to include my voice in this research study. Initially, such advice aggravated me; however, as the time passed, I remembered what it meant for me to conduct the research that is born out of passionate and personal need to know and understand. While trying to negotiate the personal boundaries that I placed between me and the dissertation I had to

complete, it finally all fell into place. I was sitting in my cubicle at work and suddenly I realized that it was time for me to narrate my story. I knew then that choosing a heuristic inquiry (Douglass & Moustakas, 1985; Moustakas, 1990) as my research methodology would allow me to explore my own experiences of counselling, as well as the experiences of counselling of other refugees. Heuristic inquiry allows the researcher to create understanding and meanings of phenomena through internal pathways of self (Douglass & Moustakas, 1985). Heuristic inquiry also enables the researcher to explore openly and pursue the creative path of narrating unique stories about the persons' experiences of the phenomenon being studied. As such, heuristic inquiry seemed to be the most congruent methodology for my research study.

The question, *What is the experience of counselling for refugees?*, lingered in my mind for a long time. I often wondered what would be a significance of finding an answer to it. What legacy did I want to leave behind with this research and this dissertation? Perhaps, the most important realization was that I wanted to understand the meaning of my counselling experience as well as the counselling experience of six refugees who courageously dedicated their time to discuss their journeys with me. I also wanted to know what facilitates and what hinders therapeutic journeys for refugees, and what aspects of counselling are most helpful. Most of all, I wanted to tell our stories and have our voices heard in the context of how we experienced our counselling journeys; not according to some prescribed norm, dictated by people who are overly focused on refugee psychopathology and not refugees' actual experiences.

In addition to exploring the main research question: What is the experience of counselling for refugees? I also explored the following questions:

- 1. What facilitated the healing process for refugees in counselling?
- 2. What complicated the counselling process for refugees?

- 3. What aspects of counselling were particularly helpful for refugees?
- 4. What would specifically be helpful for counsellors to know in order to support refugees in counselling?

Potential Significance of the Study

Significance for Practice

The knowledge obtained from this study has potential for informing the existing counselling programs for refugees and immigrants found within larger counselling and immigration agencies and institutions. The findings of this study will be shared with counsellors, counselling agencies, immigration agencies, and refugee support personnel who are working with refugees. The findings will also be shared with professional groups via articles in peer-reviewed journals, and with the general public through presentations aimed at increasing general understanding about refugees' issues and improving the existing refugee counselling services and programs.

Significance for Theory

The knowledge obtained from this study paints a rich picture of refugees' experiences of counselling, as well as what factors contribute to successful/unsuccessful counselling outcomes. Consequently, such knowledge increases the understanding of how refugees' pre-, trans-, and post-migration journeys impact their experiences in counselling. Lastly, the knowledge obtained from this study identifies what important steps need to be taken in improving existing theories about multicultural counselling, delivering appropriate refugee counselling services, and facilitating preferred counselling outcomes.

Significance for Policy

The knowledge obtained from this study has the potential to influence and induce changes in the existing refugee counselling programs, improving the multicultural and refugee-specific counselling competencies, and influencing the larger Canadian immigration and refugee resettlement policy. This study also identifies creative ways of how to approach counselling refugees, and highlights essential differences between voluntary immigrants and refugees and their counselling needs. The results may be used to influence professional education curriculum for counsellors and other helping professionals, with the purpose of increasing their competence in delivering multicultural and refugee-sensitive counselling.

Social Significance

The knowledge obtained from this study has the potential of empowering refugees by facilitating the creation of the story about their experiences of counselling. Not only were refugees able to comment on what did not work for them in counselling, but they also shared important insights about what facilitated their healing, therapeutic engagement, and positive outcomes. The experience sharing their own point of view may further foster healing and self-transformation for refugees.

Personal Significance

Inclusion of my story in this research was unavoidable, necessary, and an extremely important step. Understanding how I experienced my counselling allows me to connect with other refugees on a deeper level and to understand the meaning of their counselling experiences. Moustakas (1990) pointed out that heuristic process is autobiographic and personal, but also social when shared with other individuals who have or have had the same or similar experiences.

Sharing our stories through this research may open the doors to a new awareness and understanding of refugee experiences, in general.

Summary

Chapter 1 represents a short outline of this study. This chapter discusses key terms, researchers' autobiographical connection to the domain of inquiry, and potential significance of the study. Chapter 2 provides a detailed literature review related to refugees, resettlement, adaptation, common challenges and barriers in refugee counselling, and the importance of culture-infused counselling.

Chapter 3 discusses heuristic methodology, the research design, and ethical considerations. My story, as well as the stories of six co-researchers¹ are provided in Chapter 4. Chapter 5 offers description of research findings, composite depiction, and creative synthesis.

Chapter 6 provides discussion of research findings. In Chapter 6, research questions and objectives of this study are revisited, and implications, limitations, and suggestions for further research are offered.

¹ In heuristic research, participants are commonly referred to as co-researchers

² Acculturation strategies are described as: (a) *assimilation* (low retention of one's original culture and high maintenance of the dominant culture); (b) *separation* (high retention of one's original culture and rejection of the dominant culture); (c) *marginalization* (low maintenance of the dominant culture and low retention of one's original culture); and (d) *integration* (high maintenance of the dominant culture and high retention of one's original culture).

CHAPTER TWO: LITERATURE REVIEW

Today, the world represents the battlefield between people, diverse nationalistic groups, different political regimes, and natural resources. As a result, many individuals continue to be forced to flee their countries due to increased violence, persecution, civil conflicts, and torture. Many of these individuals will require counselling to address the psychological impact of their refugee experiences (Arthur et al., 2010).

This chapter outlines the counselling literature about refugee experiences, with a focus on refugees' common concerns in the process of resettlement and adaptation. This chapter also provides a brief description of the existing refugee counselling frameworks, and it addresses the refugee experiences related to accessing and pursuing available counselling resources. The discussion represents an overview of refugee experiences; one should be cautious not to make generalizations about refugees, their transition, and help-seeking experiences.

Rationale for the Chapter

In preparation to write this chapter, I evaluated my own conceptual framework pertaining to refugees and refugee counselling, as well as the existing literature about refugees, their presenting concerns, and current refugee counselling frameworks. Upon the careful review, I decided to divide this chapter in four general sections, each addressing issues relevant to refugees: (1) demographics; (2) common presenting concerns of refugees; (3) current refugee counselling frameworks; and (4) issues with access to refugee counselling. My choice was based on my understanding of what counsellors need to consider when working with refugees from diverse life experiences.

In response to rapidly changing population demographics in Canada, it is safe to conclude that counsellors will encounter refugee clients in their practice. In order to provide effective refugee counselling and facilitate meaningful cultural transitions for their clients, counsellors are

invited to consider refugees' presenting concerns from a holistic standpoint. Although refugee clients present with wide array of psychological concerns, it is important to explore their interpretation of pre-migration circumstances, and how they affect their resettlement and subsequent adaptation in Canada. Specifically, forced exile, trauma, and torture are closely linked to acculturation and identity reconstruction challenges that refugees experience (Djuraskovic & Arthur, 2009). The extreme uprooting combined with the effects of trauma may negatively impact the refugees coping strategies and subsequent adaptation to the new life in Canada. Focusing on refugees' diverse interpretations of their experiences allows counsellors to explore both refugees' unique concerns, as well as wider cultural and societal paradigms within which these concerns occur.

Being aware of refugees' presenting concerns is necessary but not enough to create meaningful client change. In order to understand what works for refugees in counselling, it is important to examine the current refugee counselling frameworks. Of course, there are many different therapeutic approaches to examine. However, for the purposes of this chapter, I chose to examine only those that I interpreted as relevant to refugee counselling. These counselling frameworks are discussed in detail later in this chapter. Nevertheless, I think it is important to be transparent about my rationale for choosing to discuss some approaches over the others. My choice was twofold. First, I wanted to examine what counsellors currently have available in their toolbox in order to identify both gaps and innovations related to effective refugee counselling. Second, I wanted to explore whether refugees' storytelling about their experiences is included and seen as valuable within these counselling approaches.

As I bring my literature review to a close, I was curious about what else needs to be addressed within this chapter. I realized that no matter how many refugee counselling

approaches counsellors use and/or know about, refugees still underutilize counselling. In response to my curiosity, I realized that it is extremely important for counsellors to be aware of and challenge the barriers that refugees experiences when accessing counselling services. I believe that the counsellors' mandate extends beyond the counselling office and should include collaborative challenging of the existing barriers that prevent refugees from having their concerns addressed. Identifying pertinent cultural, language, and counsellor-client barriers is essential in order to understand how to improve existing and develop new ways of addressing refugees' concerns.

One should be aware that the abovementioned rationale is based on my personal interpretation of refugees and refugee counselling. Counsellors are invited to engage in their own expansion of understanding and critical evaluation of existing refugee counselling services in order to provide adequate support to refugees. A good starting point is to orient themselves to the increasing numbers of refugees that are arriving in Canada each year. The next of section of the chapter will focus on the refugee demographics, followed by the discussion of refugees' common presenting concerns, existing refugee counselling frameworks, and the issues that refugees encounter when they decide to access counselling help.

Refugees

In 2010, Canada welcomed between 240,000 and 265,000 immigrants (Citizenship and Immigration Canada, 2010) and accommodated between 10,000 and 12,000 refugees (Citizenship and Immigration Canada, 2010). In 2013, the government of Canada committed to increasing the number of refugees resettled and expanding the assistance for refugees. This resulted in increase of the number of resettled persons by 20% and commitment to resettling 14,500 refugees in Canada each year (Citizenship and Immigration Canada, 2013). Many of

these individuals will require counselling to help them with challenges common to pre-, trans-, and post-migration process. Counsellors may expect to provide services to refugees, even when counselling refugees is not their main area of focus (Arthur et al., 2010).

There are many unique challenges associated with the provision of culturally-responsive counselling to refugees. To provide culturally-sensitive counselling to refugees, counsellors must consider the infusion of multicultural counselling competencies into their practice (Arthur et al., 2010; Pedersen, 2002). The foundation of multicultural competence is based on counsellor awareness of personal attitudes, while considering the worldviews of other people (Collins & Arthur, 2007). Purposeful inclusion of cultural awareness and insight into all aspects of counselling provides the atmosphere in which contextual influences and clients' unique perspectives can be explored (Arthur & Collins, 2010a). The inclusion of cultural sensitivity expands the periphery of healing where issues of racism, multiple oppressions, absence of social justice, and cultural and political inequalities can be addressed in an empowering manner, while creating collaborative processes of authoring and re-authoring the lived experiences of clients.

In order to address the abovementioned challenges of refugees, it is important to understand the unique concerns that refugees experience in the process of resettlement and adaptation. These concerns are discussed in detail in the next section of the chapter.

Common Concerns in the Process of Resettlement and Adaptation

The lives of refugees are influenced by numerous personal, cultural, political, and social factors (Bemak & Chung, 2002; Wilson, 2004). Refugees bring stories of multiple losses, forced exile, trauma, and complete disruption of their lives (Bemak, Chung, & Pedersen, 2003; Birkett, 2006). The pre-migration period of refugees is characterized by uncertainty, absence of safety, and experiences of severe interpersonal violence (Craig, Sassou, Schank, & Essex, 2008). The

exposure to adverse life circumstances, as well as heightened vulnerability, places refugees at risk for experiencing significant adjustment and acculturation challenges (Djuraskovic & Arthur, 2009). The interplay of multiple factors such as uprooting, traumatization, and multiple-marginalization produce unique barriers for refugees in resettlement countries (Bala, 2005). The common resettlement issues of refugees include: loss (Bemak & Chung, 2002), uncertainty about the future (Saldaña, 1992), housing issues (Arthur et al., 2010), unemployment (Yakushko, 2009), gender role changes (Arthur & Merali, 2005), language difficulties (Yakushko, 2006), culture shock (van der Veer, 1992), intergenerational conflicts, racism and discrimination (Chung, Bemak, Ortiz, & Sandoval-Perez, 2008), and overall disruption of familiar life patterns (Bemak et al., 2003).

Refugees share different interpretations of migration challenges (Bala, 2005). Their efforts to create meaning from their experiences are influenced by intersecting personal and social worldviews, and broader socio-cultural discourses. Although not all refugees experience severe problems during resettlement, the growing agreement exists that refugees are one of the most vulnerable populations in Canada (Arthur et al., 2010). The numerous hardships experienced by refugees may last for many years and often compromise meaningful adjustment and acculturation in their new countries (Djuraskovic & Arthur, 2009). Such struggles are best addressed early in counselling through culturally-responsive practice (Yakushko & Chronister, 2005), and through building safe, empathic, and culturally relevant counselling relationships (van der Veer & van Waning, 2004).

Four Common Concerns Experienced by Refugees

The concerns of refugees during resettlement and adaptation are numerous. Although attending to all of them is important, some may present stronger challenges for refugees and

counsellors than others. For the purpose of this dissertation, four common concerns will be discussed: (a) forced exile, (b) trauma and torture, (c) acculturation, and (d) intersecting identities.

Forced Exile

Forced exile is defined as a forced departure from one's home due to war, political instability, or some other disaster and movement to foreign places often in unfamiliar cultures (Wilson, 2004). Forced exile brings forward unique challenges for individuals because it often includes the experiences of extreme uprooting (Wilson, 2004). During uprooting, many refugees experience trauma, including detention, torture, disappearance of family, guilt, bereavement, and overall fear of losing one's life (van der Veer, 1992). In order to appreciate the myriad of challenges that refugees experience, it is important to make a distinction between refugees and voluntary immigrants (Bemak et al., 2003).

Anderson, Hamilton, Moore, Loewen, and Frater-Mathieson (2004) noted the resettlement journeys of both voluntary immigrants and refugees begin in their countries of origin and conclude in the resettlement countries. Anderson et al. (2004) reported that refugees experience living in at least one transitory environment before the final resettlement. Such transitory environments include refugee camps, detention centres, and environments within and outside refugees' countries of origin, in which refugees may live up to several months or even years (Wilson, 2004).

Refugees are distinguished from other migrants by the involuntary nature of the departure from their countries of origin. Although voluntary migrants experience relatively safe journeys to resettlement countries, refugee migrations are often more complex in nature. Kunz (1973, 1981) described *push/pull* factors that influence the migration of refugees and voluntary

immigrants. Refugees are *pushed* out of their countries and forced into resettlement; voluntary immigrants are *pulled* to the new country for better educational, social, and economical opportunities (Boyd, 1989; Kunz, 1981). The conditions that *push* refugees out of their countries include war (Silove, 2004), fear of political persecution (Bemak et al., 2003), and absence of safety (Boyd, 1989). More often than not, refugees unwillingly leave their homes and experience challenges of uncertainty about their futures, worries about the loved ones who stayed behind, guilt and shame, and struggles with political events that are outside of their control (Bemak et al., 2003; van der Veer, 1992).

While it can be argued that the migration experiences of refugees and voluntary immigrants are similar, the life circumstances that lead them to leave their homelands are of significant difference (Djuraskovic & Arthur, 2009). Voluntary immigrants experience more optimistic outlooks about their resettlement and are more satisfied with their life in the receiving country (Escobar, Nervi, & Gara, 2000). In contrast, the resettlement journey of refugees can have a profound influence on their abilities to manage subsequent adaptations (Arthur & Merali, 2005; Arthur et al., 2010; Volkan, 2004). Forced displacement represents an extremely challenging event, wherein refugees are often psychologically unprepared for unexpected exile and resettlement (Bemak et al., 2003). When choices about relocation of refugees are constrained, the experiences of forced exile and separation from familiar environments are often heightened and refugees' challenges are further amplified (Arthur et al., 2010).

Trauma and Torture

Trauma has been defined as the negative event that causes individuals to experience an extreme and overwhelming distress (Briere & Scott, 2006). Trauma experiences are often accompanied with the sense of chaos, concerns for safety, and overall disruption of personal

stability (Bemak et al., 2003). The World Medical Association Declaration of Tokyo (1975) defined *torture* as "deliberate, systematic or wonton infliction of physical or mental suffering by one or more persons acting alone or on the orders of any authority, to force another person to yield information, to make a confession or for any other reason" (Preamble section, para. 2). Based on the counselling literature, refugees are one of the most traumatized and tortured populations in the world (Eisenbruch et al., 2004; Gorman, 2001; Rasmussen, Rosenfeld, Reeves, & Keller, 2007; Volkan, 2004). Examples of torture include extended confined isolation and physical mutilation (Pope & Garcia-Peltoniemi, 1991), slave labour and starvation (Modvig & Jaranson, 2004), beatings and rapes (Mollica & Caspi-Yavin, 1991), threats and mock executions (Modvig & Jaranson, 2004), and other forms of severe violence. Trauma and torture not only represent the violation of personal safety, but also the violation of human rights and social justice. For many people, the act of torture results in a silent suffering of multiple oppressions.

Although refugee trauma and torture occur most commonly in the pre-migration context, its effects linger on in refugees' lives long after traumatic events have ended. Mollica (2006) encouraged counsellors to listen to clients' stories of trauma while mindfully integrating the historical context within which trauma occurred. Arthur and Ramaliu (2000) discussed how counsellors and clients can identify and describe three common themes: (a) factual details of traumatic events, (b) cultural meanings of trauma, and (c) the untold stories of suffering.

Mollica, Wyshak, and Lavelle (1987) organized pre-migration trauma into four distinct categories: (a) deprivation of necessities for survival, (b) physical injury including torture, (c) detention and forced participation in re-education camps, and (d) witnessing the torture and other interpersonal violence. Specific forms of systematic physical, psychological, and sexual

violence and exploitation have been recognized (Turković, Hovens, & Gregurek, 2004; van der Veer, 1992), including the following: forcefully impregnating women through gang rapes (Kozaric-Kovacic, Folnegovic-Smale, Skrinjaric, Szajnberg, & Marusic, 1995), witnessing the sexual assault on one's children and mutilation of genitals (Modvig & Jaranson, 2004), and forceful separation from the primary family (Walter & Bala, 2004). A new way for counsellors to address trauma necessitates movement beyond traditional categorizations of traumatic experiences. Although refugee trauma can be described and defined in copious ways, it is primarily an assault on individuals' meaning and conceptualization of self (Alcock, 2003).

When refugees experience trauma, they interpret such events in unique and culturally diverse ways. Counsellors are invited to support refugees in making meaning of their traumatic experiences and participate in creation of awareness and understanding. How well refugees adapt to life in resettlement countries depends on their individual abilities to engage in the restoration of meaning within their experiences. Each refugee will find his or her own path to addressing their past, embracing their present, and moving towards future (Walter & Bala, 2004). Although many refugees will learn to cope without the counselling intervention, some will continue to struggle. It is important for counsellors to know that "sometimes there is no clear way, merely the recognition that what was broken cannot be perfectly mended" (Alcock, 2003, p. 306). In an imperfect world, the use of culture-infused perspectives (Arthur & Collins, 2010a) supports counsellors to embrace client-centered trajectories; while collaboratively creating the space for the reconstruction of trauma stories with clients.

Acculturation

Acculturation has been defined as a cultural change provoked by the clash of two or more autonomous cultural systems (Social Sciences Research Council Summer Seminar on

Acculturation, 1954). It has also been described as a form of adaptation during which refugees and immigrants move away from their cultural group and take steps to become members of the receiving culture (Berry, 2001). Both voluntary immigrants and refugees experience changes as a result of migration. However, refugee experiences are often more complex (Berry, 1997, 2006a; Yakushko, Watson, & Thompson, 2008) due to pre-migration traumatic events (Marsella, Bornemann, Ekblad, & Orley, 1994), and multiple challenges during and after the resettlement (Djuraskovic & Arthur, 2009).

Research focused on acculturation has rapidly multiplied over the past several decades. Studies have been conducted about the adjustment styles that immigrants and refugees use to adapt to the new culture (e.g., Khoa & vanDeusen, 1981; Lin, Masuda, & Tazuma, 1982; Meszaros, 1961; Westermeyer, 1989); acculturation strategies (e.g., Berry, 1997, 2006a, 2006b; Wong-Rieger & Quintana, 1987); the role of culture shock in the acculturation process (e.g., Eleftheriadou, 1999; Pedersen, 1995); political, economic, occupational, familial, social, religious, and cognitive domains of acculturation (e.g., Navas et al., 2005); and acculturation as an ongoing and multifaceted process (e.g., Djuraskovic & Arthur, 2009). I will focus my discussion on Berry's (1997, 2006a, 2006b) bicultural acculturation framework, because it has been the most cited in the counselling literature.

Berry (1997, 2006a, 2006b) has represented a dominant voice in this area of research since the 1990s. Berry (1997) identified two cultural groups that participate in acculturation (dominant and non-dominant cultural group), and described two concepts that influence the outcome of acculturation for immigrants and refugees: (a) *cultural maintenance* (the extent to which individuals remain connected to their culture of origin); and (b) *contact* and *participation* (the extent to which individuals interact with the dominant culture). Berry (1997) further

expanded the landscape of his acculturation framework to include four *acculturation strategies*:

(a) *assimilation*; (b) *separation*; (c) *marginalization*; and (d) *integration*². Within this framework, the strategy of *integration* represents the healthiest strategy in the acculturation process.

Berry (2006b) described refugees as individuals who undergo complex and challenging acculturation process. When refugees are uprooted and forced to leave their homes, settling in new societies reveals their struggle to choose appropriate acculturation strategies. Often, the choice of acculturation strategy is influenced by refugees' attitudes, motivations, skills, and values (Berry, 2006b), as well as the openness of the receiving culture (Berry, 2001). If personal and social conditions are less than ideal, refugees will experience hardships with acculturation, meaningful exploration, and self-identification with the new culture (Everly & Lating, 2004). Berry's (1997, 2001, 2006a, 2006b) acculturation framework challenges the notion of acculturation as a unidimensional process that involves only individuals who move across cultures. However, a focused lens into the acculturation discourse that Berry (1997, 2006a, 2006b) proposes, one will discover language that easily divides populations into two categories: those with power, and those without. A critical review might also suggest oversight by Berry, of the critical influences of racism, prejudice, oppression, and exclusive dominance of the receiving society (Ngo, 2008). When the responsibility to successfully acculturate is placed only on immigrants and refugees, the outcome is one that emphasizes the onus of change on the resettling individuals (Ngo, 2008).

_

² Acculturation strategies are described as: (a) *assimilation* (low retention of one's original culture and high maintenance of the dominant culture); (b) *separation* (high retention of one's original culture and rejection of the dominant culture); (c) *marginalization* (low maintenance of the dominant culture and low retention of one's original culture); and (d) *integration* (high maintenance of the dominant culture and high retention of one's original culture).

Counsellors are encouraged to consider the acculturation process using the culture-infused lens (Arthur & Collins, 2010a). Acculturation process is what its name implies – a process-oriented journey. It is a process that is ongoing and long-lasting, where individuals may experience competing desires to become one with receiving culture or rebel against the same (Djuraskovic & Arthur, 2009). Counsellors are invited to consider the notion that acculturation is not static and determined by one's choice of acculturation strategy. Rather, it is a process that is negotiated between individuals where mutual transformation of immigrants and refugees and the receiving culture takes place (Ngo, 2008).

Intersecting Identities

The term *refugee identity* has yet to be adequately defined in the counselling literature. When the term *identity* is used in relation to refugees, it most commonly refers to *cultural identity*. *Cultural identity* has been defined as a "dynamic, multidimensional construct that refers to one's identity or sense of self as a member of an ethnic group" (Phinney, 2002, p. 63). Cultural identity development has been described as the process that evolves over time and is influenced by individuals' experiences, actions, and choices (Phinney & Ong, 2007). There are many different cultural identity models including: (a) interactional cultural identity development model (Phinney, 2002), (b) Minority Identity Development Model (Atkinson, Morten, & Sue, 1989), and (c) racial identity development models (Cross, 1995; Helms, 1995). For the purpose of this dissertation, I will discuss only Phinney's (2002) interactional cultural identity model because it has been, along with Berry's (1997, 2006a, 2006b) model of acculturation, most cited in the counselling literature.

According to Phinney, Horenczyk, Liebkind, and Vedder (2001), cultural identity is best understood through the interactional model by bridging the acculturation and cultural identity

development process. How successfully an individual will develop his or her cultural identity depends on the maintenance of the culture of origin and participation in the receiving culture. Individuals develop cultural identity according to acculturation strategies they choose to use (Phinney et al., 2001). Depending on which acculturation strategy an individual uses, he or she may develop *assimilated, separated, marginalized,* and/or *integrated* cultural identity, with an *integrated identity* being the healthiest.

Although Phinney (2002) recognized the dynamic interaction between cultural identity and acculturation process, she did not extend her discussion to include influences that racism, discrimination, and the absence of familiarity with the new cultural environment have on individuals' identity development. It would appear that Phinney relied on Berry's (1997, 2006a, 2006b) acculturation model; thus implying that identity development cannot be a healthy process unless the integration between cultures is achieved.

When refugees leave their homes and resettle in their new cultures, they often experience multiple losses and identity confusion. The process of identity loss and reconstruction is closely tied to refugees' overall experiences of forced exile, resettlement, and subsequent adjustment (Djuraskovic & Arthur, 2009). When the lives of refugees are uprooted and important aspects of their identities are lost or even erased (e.g., occupational and social status, family connections, sense of belonging to a particular culture), they often experience struggles with finding their place within the new cultural contexts (Bemak et al., 2003). Loss of individual identities, combined with multiple oppressions experienced by refugees, often results in human suffering.

It is important to be aware that the construction and reconstruction of multiple cultural identities play an important role in the refugees' overall adjustment. Collins (2010) proposed that "an individual's identity can only be understood through exploring the unique social space

that emerges at the intersection of these multiple identities" (p. 250). Each individual presents with a number of unique cultural identities that influence his or her understanding and subsequent interpretations of the world (Collins, 2010; Hong, Wan, No, & Chiu, 2007). During the resettlement and adaptation, each individual experiences a unique and ongoing review of self in relation to multiple contexts (Djuraskovic & Arthur, 2009). Culture-infused counselling calls counsellors to gain insight about diverse cultural identities of their clients, and consider the view that cultural identity is "complex, fluid, intersectional, and dynamic phenomenon" (Collins, 2010, p. 248). Refugees arrive in Canada from all over the world, and their cultural identities are influenced by multiple constructs (e.g., gender, age, sexual orientation, ethnicity, class, and spirituality). Collins and Arthur (2010a) encouraged counsellors to develop sensitivity to cultural aspects of identity that their clients identify as the most important, as well as the possible changes in cultural identity that may take place over time and space.

Although it is extremely important for counsellors to become knowledgeable and receptive to the concerns that refugees experience during adaptation and resettlement, it is also important to consider the current popular refugee counselling frameworks. These frameworks will be discussed in the next section of this chapter.

Refugee Counselling Frameworks

Although refugees face numerous challenges in their lives for which they often require counselling, identifying refugee counselling frameworks in the existing literature can be a daunting task. For the purpose of this dissertation, four frameworks relevant to refugee counselling will be examined: (1) Multi-Level Model (MLM) Approach to Psychotherapy for Refugees (Bemak et al., 2003); (2) Culture-Infused Counselling (Arthur & Collins, 2010a); (3) Dialogical Refugee Counselling (De Haene, Rober, Adriaenssens, & Verschueren, 2012); and (4)

Just Therapy (Maniapoto, 2012; Waldegrave, 2012). A detailed description of each framework is presented below.

Multi-Level Model (MLM) Approach to Psychotherapy for Refugees

The Multi-Level Model (MLM) was originally developed by Bemak, Chung, and Bornemann (1996), and later expanded by Bemak and Chung (2002), and Bemak et al. (2003). The MLM emphasizes the counsellors' development of "unique skills, understanding, and sensitivity to the history, socio-political, cultural, psychological realities, deeply rooted trauma, and loss associated with forced migration" (Bemak et al., 2003, p. 46). The MLM includes complex factors that affect refugee adjustment and overall psychological functioning while they are resettling in the new countries (Bemak & Chung, 2002). According to Bemak and Chung (2002), to provide effective counselling to refugees, counsellors must have personal awareness of ethnic identity development for both refugees and themselves, and how these identities interact in the counselling setting. Thus, counsellors must develop insight into how refugees interact with their cultures of origin, as well as how their levels of acculturation in resettlement countries affect their overall adjustment (Bemak et al., 2003). To effectively address refugees' counselling needs, counsellors must demonstrate cultural empathy (Chung & Bemak, 2002), and be prepared to challenge their own worldviews regarding racism, prejudice, discrimination, and multiple other oppressions that refugees face (Bemak et al., 2003; Chung et al., 2008). According to Bemak et al. (2003), a key factor to consider when counselling refugees is their pre-migration circumstances. They argue that collecting information about refugees' pre-migration period provides counsellors with additional understanding about the unique mental health concerns that refugees may face (e.g., trauma, posttraumatic stress disorder, survivor's guilt, political persecution, etc.). Furthermore, Bemak et al. (2003) postulated that one of the cornerstones of

successful therapy with refugees is instilling hope. Focusing on reduction of trauma symptoms and providing a space in which refugees can safely narrate the stories of their experiences further fosters the feelings of hope and overall well-being.

The MLM de-emphasizes traditional treatment approaches to refugee counselling, and focuses on addressing cognitive, emotional, and behavioural concerns of refugees, while taking into account refugees' unique cultural, familial, and social contexts. The MLM utilizes four different levels of intervention: (1) Level I: Mental Health Education; (2) Level II: Psychotherapy; (3) Level III: Cultural Empowerment; and (4) Level IV: Integration of Western and Indigenous Healing Methodologies. They are described in some detail below.

Level I: Mental Health Education. At this level, counsellors focus on educating refugee clients about the Western mental health counselling approaches and interventions (Bemak et al., 2003). Critical to effective client psycho-education is development of a strong and trusting therapeutic relationship. Bemak et al. (2003) encouraged counsellors to suspend their assumptions and include cultural sensitivity in their "knowledge base of refugee clients" (p. 51). They identified transparency about the therapeutic process, as well as the nature of sessions, confidentiality, the role of interpreters, and therapeutic boundaries to be important topics to address with clients at this counselling stage. Not only does this allow counsellors to share important information with their clients, but it also allows them to collect relevant history regarding "etiology, course, help-seeking behaviour, and treatment outcomes as well as culturally unique symptom manifestation and preferred treatment expectations and outcomes" (Bemak et al., 2003, p. 53).

Level II: Psychotherapy. This level of the MLM focuses on traditional Western approaches to individual, family, and group counselling (Bemak & Chung, 2002). Several

Western approaches have been shown to be effective for refugees including: cognitive-behavioural therapy, gestalt therapy, narrative therapy, family therapy, and psychodrama (Bemak et al., 2003). For Western counselling approaches to be effective for refugees, they must include refugees' cultural understandings, worldviews, and contexts (Bemak et al., 2003). Thus, increased understanding of counselling theories, therapeutic processes, and culturally relevant factors is crucial when working with refugees. Counsellors must pay attention to their clients' cultural understandings of mental health issues and diagnoses. For many refugee clients, Western diagnoses of mental illnesses are an unfamiliar concept. Furthermore, Western conceptualizations of mental health issues may not be helpful when working with refugees (Bemak et al., 2003). Therapists are encouraged to become familiar with refugees' understanding of mental illness before effective diagnoses and treatment plans can be developed.

Level III: Cultural Empowerment. At this level of counselling, therapists engage in advocacy, and promote social justice in order to help refugee clients develop an increased sense of mastery over their environment (Bemak & Chung, 2002; Bemak et al., 2003). Most refugees who present for counselling experience numerous issues related to their daily living including: housing problems, occupational challenges, language fluency struggles, and postadjustment challenges (Arthur et al., 2010). Counsellors play an important role in assisting refugees with information about various resources in the community and how to best access them (Bemak et al., 2003). Counsellors who adopt the MLM are encouraged to become proactive social advocates and focus on promoting strategies to support refugees in standing up to systemic policies "that are troublesome and unfair and present problems for refugee clients" (Bemak et al., 2003, p. 57). Bemak and Chung (2002) suggested that counsellors adopt the role of a "cultural systems information guide" (p. 225), assisting refugees with their adjustment process, as well as

collaborating with them to develop skills to stand up to racism, discrimination, and oppression that they may encounter within the dominant culture (Bemak et al., 2003).

Level IV: Integration of Western and Indigenous Healing Methodologies. At this level, the MLM focuses on integration of Western therapeutic approaches and indigenous healing methods. According to Bemak et al. (2003) such integration leads to more favourable counselling outcomes for refugees. Counsellors who work with refugees are encouraged to incorporate alternative and culture-specific healing practices in their work with refugees, and develop relationships with significant individuals (e.g., priests, monks, community leaders, and traditional healers) within their clients' cultural communities (Bemak & Chung, 2002; Bemak et al., 2003). Increasing their knowledge about physical therapies, magic healing practices, counselling, and medications and how they are understood within clients' cultural frameworks, aids counsellors in fostering collaborative partnerships not only with individual clients but also with their communities and society in general.

Culture-Infused Counselling

Culture-Infused Counselling is built on a premise that culture is a central factor necessary for understanding all human beings (Arthur & Collins, 2010a). It posits that cultural awareness is an essential competency in all counselling stages, as well as in all additional aspects of practice in which counsellors are engaged in (Arthur & Collins, 2010a). Culture-Infused Counselling holds the position that all human beings need to be viewed and understood within their own cultural context, and that all counselling is multicultural in nature. Such consideration advances the recognition of multiple personal, social, and systemic influences in the lives of all individuals, as well as limitations to the provision of culturally-responsive counselling.

Culture-Infused Counselling (Arthur & Collins, 2010a) expands the notion that to provide effective and culturally-competent therapy, counsellors must gain expertise in the following three areas: (a) counsellors' sensitivity to their own attitudes, values, and biases; (b) cultural knowledge and understanding of clients' worldviews; and (c) development of culturally-sensitive skills (Sue, Arredondo, & McDavis, 1992). Within the Canadian multicultural context, Collins and Arthur (2010b) developed a definition of culture-infused counselling competence, including:

the integration of attitudes and beliefs, knowledge, and skills essential for awareness of the impact of culture on personal assumptions, values, and beliefs, understanding the worldview of the client, coming to agreement on goals and tasks in the context of a trusting and culturally sensitive working alliance, and reinforcing that alliance by embracing a social justice agenda. (p. 55)

This definition emphasizes the importance of integration of multiple factors that influence the counselling process. From this perspective, the importance of considering refugees' unique, multifaceted, and personal experiences becomes essential (Collins & Arthur, 2010b). Effective culture-infused counselling includes practitioner awareness of the multiple intrapersonal, interpersonal, and systemic obstacles faced by refugees inside and outside the counselling relationship (Chung et al., 2008). An additional step includes taking action in changing existing policies and statues to enhance the development of allied and culturally-responsive practice. Effective culture-infused counselling also includes establishment and maintenance of culturally sensitive working alliance with clients (Collins & Arthur, 2010b). Faiver, Eisengart, and Colonna (2004) consider culturally-sensitive working alliance to be the pillar for building rapport with clients and enhancing the awareness and communication of clients' struggles, values, and culturally-diverse perspectives. The culture-infused working alliance places emphasis on

building mutual trust and respectful interactions that are co-constructed between clients and counsellors (Collins & Arthur, 2010b). Such alliances allow counsellors and clients to explore clients' presenting and underlying concerns, while collaboratively challenging multiple oppressions (Hays, 2008) in all aspects of counselling, including setting, assessment, and interventions (Alderson, 2010).

The role of social justice. The openness of resettling countries has been shown to have a significant impact on the overall well-being of refugees and immigrants (Chung et al., 2008). Despite Canada introducing the multicultural agenda into its policies and regulations, many refugees and immigrants continue to experience multiple oppressions on personal, social, and institutional level (Arthur et al., 2010). These multiple oppressions have been shown to negatively impact their adaptation to the new culture and seriously undermine their human rights (Chung et al., 2008). Culture-infused counselling challenges counsellors to identify and confront discriminatory and oppressive practices and extend their position to include a firm social justice agenda (Arthur, Collins, McMahon, & Marshall, 2009; Kenny & Romano, 2009). A vision of social justice seeks to eliminate social inequality and societal structures "that limit resources based on group or individual characteristics, including age, race, ethnicity, social class, poverty, religion, gender, immigration status, sexual orientation, and language" (Kenny & Romano, 2009, p. 23). Counsellors are encouraged to expand their professional roles to include active advocacy, client empowerment, and strategies aimed at reducing and subsequently eliminating multiple obstacles that refugees face (Arthur & Collins, 2010b; Arthur et al., 2010; Chung et al., 2008).

Development of a multicultural agenda in Canada created a shift in regards to how clients' issues are addressed and what counsellors' roles best serve the needs of a culturally diverse society (Arthur & Collins, 2010b). Collins and Arthur (2010c) pointed out that even

with strengthening of counsellors' culture-infused counselling competencies, numerous challenges in promoting culturally sensitive practices and social justice remain. Continuous efforts to positively impact clients' well-being, recognize diverse experiences, and engage in transformative activities that promote social justice will prepare counsellors to co-create meaningful changes in the lives of the clients they work with, while adhering to ethical practice (Arthur & Collins, 2010c).

Dialogical Refugee Counselling

Dialogical refugee counselling evolved in response to traditional clinical models that focus solely on addressing refugee trauma (Ehntholt & Yule, 2006; Murray, Davidson, & Schweitzer, 2010). Moving away from symptom reduction and focus on posttraumatic stress, dialogical refugee counselling "implies a radical questioning of objectifying definitions of pathology" (De Haene et al., 2012, p. 393). It utilizes therapeutic conversation as a unique way of exploring refugees' concerns. As such, dialogical refugee counselling is situated around refugees' lived experiences, and it directs counsellors to collaboratively engage with refugees' narratives that represent expressions of refugees' worlds (Rober & Seltzer, 2010).

Dialogical refugee counselling focuses on the refugees' unique meaning-making process, and facilitates disclosure of refugees' experiences of forced migration, trauma, and resettlement (De Haene et al., 2012). It describes a therapeutic journey from autobiographical trauma narration to co-creation of stories of meaning. De Haene et al. (2012) argued that the disclosure of trauma within a safe therapeutic relationship creates a space in which "retelling and revisiting traumatic experience operate as central mechanisms of recovery" (p. 394). Thus, a dialogical counselling approach encourages the processes of remembering and forgetting, and invites refugee clients to reflect on the meanings of their problem-saturated stories (Rober, 2002).

Dialogical refugee counselling focuses on negotiation of meaning as a joint process between refugee clients and counsellors (De Haene et al., 2012). The story of trauma that is told in a therapeutic setting is treated as a positive adaptation characteristic. The therapeutic conversation that takes place about refugees' experiences serves as a vehicle for construction of meaning (De Haene et al., 2012). As the refugees' stories are deconstructed, the healing moves from an individual process to relational therapeutic encounter. The end result is a co-authored trauma narrative that includes both refugees' and counsellors' voices (De Haene et al., 2012).

The role of a counsellor within dialogical refugee counselling is to use his/her personal experiences as means of reflective engagement with refugee clients (De Haene et al., 2012). Counsellors are invited to actively listen to their clients' narratives, respectfully challenge silencing, and engage in collaborative building of alternative and more preferred meanings for refugees (De Haene et al., 2012). Such approach to counselling clients prevents refugee marginalization, and reduces the impact of power that the dominant culture may have on the lives of refugees (Bala, 2005). The relational meanings that counsellors engage in "may resonate in the therapist's inner voices and, hereby, invite his/her careful engagement with a negotiation of remembering and forgetting, otherness, and power disparities within the therapeutic relationship" (De Haene et al., 2012, p. 396).

Dialogical refugee counselling moves away from traditional counselling models, and encourages counsellors to situate their practice within a postmodern philosophical paradigm. Its focus on therapeutic collaboration, co-creation of narratives, and client advocacy opens up a new corridor to refugee care (De Haene et al., 2012). As such, it uses language in a way that challenges oppression, psychopathology, power structures, and systemic obstacles that prevent refugees from healing. Increasing the collaboration between refugee clients and counsellors and

placing the emphasis on therapeutic conversation "may move beyond a mere reliving of trauma towards sharing voices of powerlessness, distrust, and violence as deep expressions of humanity, holding the promise of continuity, and restoration in the face of adversity" (De Haene et al., p. 402).

Just Therapy

Although not geared specifically at refugee populations, The Just Therapy grew out the need to acknowledge vulnerable populations, and challenge the dominant therapeutic discourses. The Just Therapy framework views an individual's context as critical to his/her development and well-being (Waldegrave, 2012). According to Waldegrave (2012), "people learn to value certain ways of acting in the world over others through the primary expressions of care they receive that in turn impart culture, socioeconomic status, and gendered cues. These cues take on specific meanings and words with associated emotions and body cues amplify those meanings" (p. 196). Thus, the focus on cultural sense of belonging and collectivism creates meanings within a particular culture.

The Just Therapy framework emphasizes multigenerational identities, and challenges the ideas of unilinear traditional therapies that have historically marginalized vulnerable groups (Maniapoto, 2012; Waldegrave, 2012). The Just Therapy seeks to bring equality and justice into the therapeutic process, and honours "a plurality of knowledge and experience" (Waldegrave, 2012, p. 198). Instead of helping people adjust to their problems, The Just Therapy assists individuals in developing resilience and hope, and focuses on the importance of cultural knowledge, spirituality, and collective creation of meaning.

The main therapeutic concepts. The Just Therapy rests on three main pillars: (1) *Belonging*; (2) *Sacredness*; and (3) *Liberation*, and their interrelatedness with one another.

Belonging refers to an individual's sense of who he/she is, his/her specific culture and history, and his/her cultural roots. *Sacredness* refers to an individual's honouring of humanity, qualities of fellow human beings, and the overall environment. *Liberation* refers to an individual's sense of freedom, unity, and justice. Waldegrave (2012) emphasized:

It is the inter-dependence of these concepts that is important, not one without another. Not all stories of belonging are liberating, for example, and some experiences of liberation are not sacred. It is the harmony between all three concepts that authentically characterizes a just therapy. (p. 209)

The role of a therapist. Within The Just Therapy framework, therapists are viewed as holders of the expert knowledge about people's mental health concerns. The clients are viewed as experts on their experience of mental health concerns (Waldegrave, 2012). Since therapists are professional experts who continuously witness individuals' pain, they are invited to use their knowledge and disseminate it to impact the larger mental health policy. For example, Waldegrave (2012) posited that therapists are "thermometers of pain in modern countries. Instead of withholding their knowledge in clinical vacuum, they can quantify, describe, and identify causality for all to see" (p. 205). Thus, therapists are invited to openly engage with disenfranchised peoples, and publicly advocate on their clients' behalf.

Therapeutic process. The Just Therapy holds that context, gender, and/or socioeconomic status need to be discussed in a therapeutic setting. If possible, people in a particular cultural community are seen by a counsellor from the same community (Maniapoto, 2012; Waldegrave, 2012). When this is not possible, mainstream counsellors work closely with cultural consultants, elders, and spiritual leaders to support those who are in need of counselling (Waldegrave, 2012). The focus of therapeutic discourse is not on the clients' pathology.

Instead, the focus is on the clients' strengths, resilience, hope, and identified survival skills (Waldegrave, 2012). In addition, the use of cultural metaphors is viewed as critical as it allows clients to develop new understandings from their cultural standpoints, and create "new and preferable meanings that recognize the socioeconomic realities and encourage the recognition of powerful inner strengths within the client/s" (Waldegrave, 2012, p. 208).

Critical Evaluation of the Refugee Counselling Frameworks

As I was finishing the review of refugee relevant counselling frameworks, I was surprised how difficult it was to find frameworks that were specifically created and/or used with refugees. Although there are numerous journal articles written about particular therapeutic approaches with particular refugee populations, more generalized conceptual counselling frameworks for refugees were difficult to locate. I chose the abovementioned frameworks for the following reasons: (a) they were specifically tailored to refugees; (b) they emphasized therapeutic relationship as an important factor to refugee counselling; (c) they focused on multiple contexts refugees come from; and (d) they emphasized inclusion of culture into counselling. The advantages and disadvantages of these frameworks are discussed in some detail below.

The MLM. The MLM (Bemak et al., 2003) is one of the rare counselling frameworks tailored only for refugees. As such, the MLM has multiple advantages including: (a) focusing on refugees' pre-migration experiences and their effect on refugees' psychological functioning; (b) integration of multiple counselling interventions; and (c) recognition of counsellors' worldviews and how they impact counselling process with refugees. Although conceptualized within Western understanding of counselling, the MLM challenges traditional view of therapy and deemphasizes the counsellors' focus on refugee psychopathology. Instead, it invites counsellors to adopt an integrative approach to counselling refugees and combine their skills, attitudes, and

knowledge in ways that embrace refugees' diverse experiences and address their concerns effectively.

A focused lens into the MLM discourse reveals a language that may be difficult for refugees to understand. For example, refugees may not be familiar with and/or open to receiving mental health education from their counsellors. Refugees may not understand Western approaches to counselling and as a result may feel disempowered during the counselling process. Additionally, refugees may not be open to accessing indigenous healing resources within their cultural communities for the fear of being embarrassed and/or shunned from their communities. Lastly, although the MLM mentions the therapeutic relationship as an important counselling factor, it says little about how such relationship is created and it minimally addresses refugees' conceptualizations of therapy. Instead, it views refugee clients as passive recipients of therapy and it de-emphasizes the role they have in their own healing.

Culture-infused counselling. Culture-infused counselling (Arthur & Collins, 2010a) is one of the first counselling frameworks developed within the Canadian context. As such, culture-infused counselling provides invaluable information that can be incorporated into refugee counselling in Canada. From my perspective, the advantages of culture-infused counselling are two-fold: (1) it includes culture into all aspects of counselling; and (2) it posits that culturally sensitive working alliance and social justice are key factors in creating preferred counselling outcomes. Culture-infused counselling is relevant to refugees because it emphasizes individuals' diverse experiences, while focusing on collaborative co-creation of empowering client narratives.

A close look at the culture-infused counselling shows a slight overemphasis on theoretical concepts and little direction how to put theory into practice. It is unclear how particular culturally sensitive counsellors' skills, attitudes, and worldviews are used in

counselling settings. Culture-infused counselling seems to an extension of multicultural counselling proposed by Sue et al. (1992) and as such has its own contribution somewhat diminished. A practical guide for counsellors addressing how they can use particular skills with refugee clients, as well as specific examples of how to put social justice agenda into practice would strengthen culture-infused counselling aspirations, and would create a strong counselling framework for all people within the Canadian context.

Dialogical refugee counselling. I was very excited when I found out about dialogical refugee counselling (De Haene et al., 2012) because it was rooted in postmodernist philosophical paradigm. Its focus on client-counsellor collaboration, power of telling and retelling the story of trauma, and counsellors' active participation during the counselling process are just a few advantages to mention. Similar to other approaches mentioned in this chapter, dialogical refugee counselling view working alliance as an essential factor in effective refugee counselling, and embraces social justice agenda to prevent refugee clients' marginalization.

Although very collaborative and socially just approach, dialogical refugee counselling overemphasizes the power of telling trauma story as a vehicle of healing. Many refugees may not be prepared to disclose and subsequently examine in detail their trauma narratives. Refugee easily could be re-traumatized when encouraged continuously to reflect on their past traumatic experiences. Dialogical refugee counselling relies heavily on the use of language in creation of the narrative. However, many refugee clients are not sufficiently fluent in English language and may experience difficulties in telling their stories. When language barriers exist, important meanings may be lost in translation and admirable goal of creating a more preferred narrative may not be achieved.

Just therapy. As another approach rooted in postmodernist philosophical paradigm, Just Therapy (Maniapoto, 2012; Waldegrave, 2012) offers a unique way to counselling clients. With its emphasis on clients' cultural diversity, sense of belonging, and equality and justice, it can be particularly well used with refugees. Its advantages are numerous and include: (a) detailing the counsellors' role as an expert on professional knowledge; (b) emphasizing multiple historical, social, and cultural contexts relevant to clients; and (c) using the cultural metaphors applicable to clients. Just Therapy seeks to minimize power differences and empower clients on both personal and social levels.

Just Therapy was first developed for Maori clients in New Zealand and tailored primarily to their needs. Thus, it may require significant modification to be fully relevant to other populations (i.e., refugees). Just therapy relies heavily on cultural matching of counsellors and clients, and the use of cultural metaphors to help clients work on their issues. Refugees come from various cultures around the world and cultural matching may not be possible. Further to that, refugees may not be open to using cultural metaphors and may not understand the purpose of using them in therapy. Counsellors who choose to depend only on cultural meanings of their clients' experiences may neglect the clients' unique presenting concerns and fail to address them effectively.

Even though several refugee counselling frameworks have been identified in the literature, refugees continue to experience challenges when accessing counselling help. None of the counselling approaches mentioned in this chapter address issues that refugees experience when accessing counselling resources. The common obstacles that refugees face when seeking counselling help are discussed in the next section of this chapter.

Access to Culturally-Appropriate Counselling Services

The importance of developing culturally-responsive counselling for refugees has been well-documented in the counselling literature (Constantine, Have, Kindaichi, & Bryant, 2007; van der Veer, 2008; Worthington, Soth-McNett, & Moreno, 2007). Vontress (2001) noted that although many immigrants and refugees seek counselling help for their issues, counsellors are unable to help them because they lack knowledge and training in providing culturally-responsive counselling. Nash, Wong, and Trlin (2006) recognized that counsellors experience challenges when working with immigrants and refugees, often requiring new knowledge and skills to competently support them. Counsellors are invited to advance their knowledge about immigration, human rights, social justice, and advocacy, and struggles that are unique to refugees (Chung et al., 2008; Nash et al., 2006).

The lack of appropriate counselling services for refugees is not a new phenomenon. Historically, refugees have been described as vulnerable individuals who are marginalized, maltreated, and severely restricted in their choices (Silove, 2004). These life events significantly contribute to refugees' challenges with regards to psychological health and overall quality of life. Despite these barriers, it has been documented that refugees underutilize counselling services and express ambivalence towards the counselling process (Bemak & Chung, 2002; Bemak & Chung, 2008a). Refugees are often: (a) not familiar with Western counselling concepts; (b) unable to afford counselling fees; (c) fearful of stigma and struggle to commit to counselling framework; and (d) and focused on re-establishing their lives, not on psychological struggles (Bemak et al., 2003; Neufeldt, Harrison, Stewart, Hughes, & Spitzer, 2001). To delineate a fuller comprehension of challenges related to refugees' access to counselling, the following

barriers will be discussed: (a) cultural barriers; (b) language barriers; and (c) counsellor-client barriers.

Cultural Barriers

Cultural barriers between counsellors and refugees often represent systemic barriers in counselling relationships. Donelly, Hawng, Este, Ewashen, Adair, and Clinton (2011) noted that immigrants and refugees either have difficulties accessing health care services or find the health care services inappropriate for their needs. Vontress (2001) stated that the views of counsellors and refugees regarding psychological struggles and counselling are "often worlds apart" (p. 95). Refugees' worldviews about the well-being of an individual, family, and community often represent a cultural mismatch between traditional customs and Western individualistic values (Bemak et al., 2003; Bhui & Morgan, 2007). Psychological distress is not always viewed by refugees as an individual dysfunction; rather, it is viewed as a combination of multiple adverse effects that are both culturally and socially embedded (Bhui & Morgan, 2007). Counsellors are encouraged to consider multiple cultural differences and incorporate diverse cultural meanings of suffering into their work with refugees (Tribe, 2002). The importance of deconstructing familiar counselling approaches and redefining them to include culturally-relevant themes is essential in providing appropriate services to refugees (Aroche & Coello, 2004; Donelly et al., 2011).

Language Barriers

Language fluency has been identified as one of the major barriers for refugees in counselling (Bhui & Morgan, 2007; Century, Leavey, & Payne, 2007; Dhall, 2007; Vontress, 2001). Bemak et al. (2003) noted that even if refugees make it to the counselling office, they are often greeted by culturally insensitive staff who have little patience to deal with them. When interpreters are available to help with language difficulties, they are often not professionally

trained for interpretation in the counselling context. When what is said in therapy is interpreted through another person's communication framework, important meanings about refugees' struggles may be misinterpreted or lost (Bhui & Morgan, 2007). Dhall (2007) stated that to be effective, interpreters have to translate accurately both ways, not insert additional information, and maintain confidentiality. Interpretation may be a challenging process for everyone involved in counselling, and may create misunderstandings between counsellors, clients, and interpreters.

Counsellor-Client Barriers

When working with refugees, counsellors may not take adequate time to establish a strong and sound therapeutic alliance, and explore specific pre-, trans-, and post-migration circumstances. Triggers of refugee displacement and resettlement often include some traumatic events (Yakushko & Chronister, 2005). When counsellors do not take the initiative to establish trust and safety in counselling, refugees often fear disclosing their traumatic experiences (Yakushko et al., 2008). Creation of a strong therapeutic relationship with refugees within the counselling context requires counsellors to step out of the traditional counselling role and engage in advocacy, challenging the rules and policies, and collaborating with refugees;' cultural communities (Bemak & Chung, 2008b). Dynamics of pre-, trans-, and post-migration experiences can be interconnected and complex. Counsellors are encouraged to consider refugees' counselling needs within these contexts and take steps towards assisting refugees in creating meaningful cultural transitions.

Summary

Refugees arrive in Canada from all parts of the world, bringing diverse stories of struggle, hardship, and oppression. Burdened with multiple struggles, and unfamiliar resettlement environments, refugees often become perplexed with continuous battles to

overcome the lived experiences of forced exile, resettlement, and adaptation. Another challenging step or constraint for many refugees involves seeking counselling.

In this chapter, I discussed the four common presenting concerns that refugees bring to counselling. In addressing the importance of counsellors' consideration of the common refugee concerns while assessing their unique contexts and worldviews, I explored refugee counselling landscape and practice. I concluded with identifying the common barriers that refugees experience when accessing counselling.

As both a refugee and a professional who works with refugees, I believe that we are all influenced by the multiple contexts in which we construct and shape our intersecting identities. We create multiple meanings in relationships with others who co-exist in those contexts with us. Thus, it is my goal in this study to present a co-created narrative about refugees' experiences of counselling. My hope is that refugees' stories captured in this study will provide important information about what works for refugees in counselling, as well as what does not work. Most of all, having refugees' voices heard may help increase collaboration between counsellors and their clients, and facilitate meaningful cultural transitions, where the metamorphosis of professional care will eliminate oppressive practices, and begin the process of mending broken spirits.

I chose heuristic inquiry to guide this research study because it represents a personal process of self-search, self-evaluation, and subsequent growth. I stopped searching for essences of my experiences long time ago, when I realized that I could never fully capture the full meaning of my counselling experience. However, I learned to capture numerous snapshots of my journey. This study is one of those snapshots. Heuristic method and research design will be described in the next chapter.

CHAPTER THREE: METHODOLOGY

Choosing the most meaningful methodology for my research has been an emotional journey of incredible ups and downs. Initially, phenomenology (Giorgi, 1985; Moustakas, 1994) seemed to be a good choice, but really quickly it became clear that it lacked depth for what I wanted to study, and it failed to provide me with an opportunity to have my voice included in this research. This insight pushed me to re-evaluate who I am as a researcher and consider heuristic inquiry (Moustakas, 1990) as the most meaningful methodology to explore refugees' experiences of counselling. This decision was influenced by my realization that, in order to understand the experiences of other refugees who have been in counselling, I had to first understand my own. Heuristic inquiry invited me to explore and include my voice in this research, and provided me with a framework that was most consistent with what I wanted to study.

In this chapter, I will discuss personal reasons for choosing the heuristic inquiry as the methodology for this study. I will provide details about heuristic inquiry, including its strengths and limitations, and my application of heuristic inquiry from a postmodern perspective. I will expand on the research design, possible ethical concerns, recruitment of co-researchers, and data analysis. It is my intention to provide the readers with a comprehensive picture of what took place in this research project, as well as offer clarity about qualitative research and heuristic inquiry in particular.

Methodology

Modernism and Postmodernism in Qualitative Research

For most of the 20th century, counselling psychology research has been characterized by the modernist thought. Modernism is rooted in the belief that the external reality exists

independent of human beings (Erwin, 1999) and thus, can only be discovered and understood by examining its essential properties through rigorous and objective observations (Gergen, 2009; Mahoney, 1991; Raskin, 2002; Sexton, 1997; Stead, 2002). Therefore, individual knowledge, objectivity, and truth are the only legitimate sources of knowing and understanding of external reality (Gergen, 2001; Sexton, 1997). While initially promising, the modernist perspective in counselling psychology research has been criticized for not answering pivotal questions about: (a) the role of multiple socio-cultural histories and contexts in the lives of individuals, (b) the importance of discourse in creation of knowledge, and (c) the risks of universalizing human experience (Hansen, 2006; Lock & Strong, 2010).

Recently, inquisitive and probing debates have prompted many researchers to consider the postmodern perspective and its influence on counselling psychology research and practice (Hansen, 2004, 2006; Lock & strong, 2010; Sexton, 1997). Unlike modernism, the postmodernist view posits that rather than discovering the external reality, human beings construct multiple realities in relation to each other (Erwin, 1999; Hansen, 2004; Hayes & Oppenheim, 1997). In other words, "the knowledge always represents some combination of the observer and the observed; truths are created, not discovered" (Hansen, 2004, p. 131). Thus, the postmodern perspective is concerned with meanings that people co-create with each other about their experiences, and not with rules and facts of the objective science.

Keeping the postmodernist values in mind, in this study, I emphasized that people make sense of their lives by creating meanings based in social and cultural discourses (Brown & Augusta-Scott, 2007). I focused on my and co-researchers' stories that we told of our counselling experience, and how together these experiences compose and shape our lives, experiences, and relationships. From this perspective, heuristic inquiry was conceptualized as a

postmodern research approach that was conducted with people for the purposes of collaborative creation of meaning. A detailed personal view of heuristic inquiry as understood through the postmodernist lens is offered below.

A Personal Connection to Heuristic Inquiry

My relationship with heuristic inquiry began during my Master's research. Combined with my desire to understand the experiences of other refugees was my need to explore and understand my refugee identity and all of its faucets. As my interest increased, and my connections to refugee population strengthened, I realized that the researcher's voice should be included in creating the new knowledge about refugees. This realization has led me to heuristic inquiry.

As I was considering various methodologies that I could use for my research, intuitively I knew that my relationship with heuristic inquiry was being rekindled. Trying to answer what was the significance of telling my story now as opposed to any other time in my life, led me to consider my experience of being a refugee client. Although this experience personally left me with confusing feelings, professionally it allowed me to grow and open myself to other people's stories. Choosing heuristic inquiry propelled me to evaluate my counselling experiences deeply and understand how they unfolded in my own life. I was able to listen and connect to my coresearchers' stories and record the multiplicity of experiences that refugees have in counselling.

Choosing heuristic inquiry to conduct this research also propelled me on an emotional roller coaster. It left me feeling fearful about where I would be once the last word of this dissertation is written. I decided to use whatever courage I had left to embark on this journey and find new meanings. One of my professors wrote a long time ago, "If I really want to know what it's like to ride a roller coaster, I have to get on it" (Alderson, 1998, p. 45). Reflecting on his

words, I realized that if I really wanted to understand the experiences of refugees in counselling, I first had to immerse in and understand my own experience.

Heuristic Inquiry

Heuristic inquiry was developed by Clark Moustakas, who extensively wrote about it in his book, Loneliness, published in 1961. The word heuristics originated from the Greek word heuriskein meaning "to discover or to find" (Moustakas, 1990, p. 9). Heuristic inquiry has been defined as an "internal search through which one discovers the nature and meaning of experience and develops methods and procedures for further investigation and analysis" (Moustakas, 1990, p. 9). Throughout the research process, researchers' own experiences are viewed as vital foci of inquiry (Hiles, 2008). Heuristic inquiry attempts to investigate the nature and meaning of phenomena through internal pathways of self, using the processes of self-reflection, exploration, and elucidation of the nature of phenomena under investigation (Douglass & Moustakas, 1985). Thus, "the self of the researcher is present throughout the process and, while understanding the phenomenon with increased depth, the researcher also experiences growing self-awareness and self-knowledge" (Moustakas, 1990, p. 9), allowing for creation of an intense personal, professional, and theoretical life-learning and transformations (Tenni, Smyth, & Boucher, 2003). Heuristic inquiry encourages researchers to explore openly and pursue the creative path that begins inside one's own being and subsequently creates direction and meaning within oneself. Heuristics places human experiences above numbers and strongly connects to the tacit knowledge that leads to subjective and creative links between researchers and phenomena they are interested in studying (Sela-Smith, 2002). Through the compassionate approach to studying phenomena of interest, researchers move towards an open discourse with co-researchers and cofacilitate an emotionally connected qualitative process (Anderson, 2000).

Most qualitative methods require researchers to "stand back from the data to create greater objectivity in the analysis" (Alderson, 1998, p. 47). Creating this distance removes researchers from an intense connection to the culture or a person they are studying (Alderson, 1998). In contrast, heuristic inquiry includes researchers' experiences in all aspects of research and allows them to collectively interact with their co-researchers (Djuraskovic & Arthur, 2010). In heuristics investigation, researchers offer their own experiences of the phenomenon as valid data; thus, embracing their own humanness as the core foundation of psychological awareness (Walsh, 1995). Through processes of self-directed, self-motivated, and spontaneous reflective learning, researchers construct a story that depicts meanings and uniqueness of significant human experiences (Douglass & Moustakas, 1985; Moustakas, 1990). In heuristics, reflexive processes are infused in all aspects of investigation. In reflecting on a heuristic journey, researchers open up a space for tacit understandings to emerge, while acknowledging their own passionate connection to the phenomenon (Etherington, 2001a).

Heuristic research allows for open-ended inquiry that unfolds in its own unique way (Moustakas, 1990). It is a process that requires researchers to be involved in a disciplined search for meanings of human experience. Deep exploration of personal experiences invites researchers' passionate and deep commitment to the heuristic process, at the expense of possibly opening personal wounds and undergoing profound personal and professional transformation (Djuraskovic & Arthur, 2010; Moustakas, 1990). The aspects of experience that are collected through researchers' self-reflections and subsequently through co-researchers' narratives offer what Denzin and Lincoln (2005) refer to as bricolage. The end result of heuristic inquiry is a complex and reflexive portrait of human experience and meanings through the interpretive lens of researchers (Scott & Brown, 2008). Researchers' and co-researchers' social and emotional

worlds are explicated leading, at least partially, to a greater understanding of the phenomenon that is being investigated (Finlay, 2002).

According to Moustakas (1990), to conduct a heuristic research, researchers are required to move through a number of processes (identifying with the focus of inquiry, self-dialogue, tacit knowing, intuition, indwelling focusing, and internal frame of reference) and phases (initial engagement, immersion, incubation, illumination, explication, and creative synthesis). These processes and phases assist researchers to reflect on their hunches, thoughts, images, knowledge, and meanings related to the phenomenon under investigation (Braud & Anderson, 1998). A detailed discussion of heuristic processes and phases is presented in the next section.

Seven Processes of Heuristic Inquiry

Heuristic research begins with the question that needs to be illuminated or answered (Hiles, 2001; Moustakas, 1990, 2001; Stevens, 2006; West, 1998). In conducting the heuristic study, researchers consider the following seven processes: (a) identifying with the focus of inquiry, (b) self-dialogue, (c) tacit knowing, (d) intuition, (e) indwelling, (f) focusing, and (g) the internal frame of reference.

Identifying with the focus of inquiry. Heuristic inquiry begins with identifying the question that will lead the study. Engaging in an open-ended and self-directed process, researchers are able "to get inside the question, become one with it, and thus, achieve an understanding of it" (Moustakas, 1990, p. 15). Without researchers' intense connection to the question, heuristic process likely cannot begin (Djuraskovic & Arthur, 2010).

Self-dialogue. To immerse fully with the phenomenon, researchers are invited to engage in an open and honest self-dialogue to become aware of the connections that they have to the focus of inquiry (Djuraskovic & Arthur, 2010; Moustakas, 1990). The discourse between

researchers and the phenomenon creates an atmosphere in which the phenomenon's multiple meanings are discovered (Moustakas, 1990), and self-directed search is facilitated (Nzojibwami, 2009).

Tacit knowing. Sela-Smith (2002) defines tacit dimension of knowledge as "that internal place where experience, feeling, and meaning join together to form both a picture of the world and a way to navigate the world" (p. 60). We often hold an implicit knowledge of an experience that we cannot necessarily verbalize or explicate (Polanyi, 1966). Embracing all elements of knowledge "creates the path of personal knowing, tapping into nuance and variation of experience, crawling inside the self and eventually making contact with the tacit dimension, the basis for all possible knowledge" (Douglass & Moustakas, 1985, p. 44). When tacit knowledge becomes explicit, the detailed description of the phenomenon is likely to take place (Alderson, 1998).

Intuition. As a bridge between implicit and explicit knowledge (Nzojibwami, 2009), intuition provides passage to heightened perception and understanding (Djuraskovic & Arthur, 2010). Intuition serves as a guide that leads researchers to clues, patterns, feelings, relationships, and perceptions that construct the meaning of the phenomenon. When researchers intuitively attend to their internal states, the phenomenon is perceived holistically, including all of its important aspects (Moustakas, 1990).

Indwelling. According to Moustakas (1990), the process of indwelling encourages researchers to turn inward, and through self-search extend the construction of meaning of the phenomenon. Indwelling invites researchers to move towards a very deliberate and personal process of meaning construction that subsequently leads to increased understanding and insight.

Focusing. This process refers to a journey through which researchers experience personal growth, insight, and change (Moustakas, 1990). Through focusing, researchers remove the clutter of external distractions, and recognize the elements of the experience that were out of their consciousness (Douglass & Moustakas, 1985). De-cluttering of personal space allows researchers to notice and examine the central themes of the experience and expand the knowledge and meaning of that experience.

The internal frame of reference. Comparable to other qualitative methods, in heuristic inquiry co-researchers remain visible in their stories they share with researchers (Moustakas, 1994). When examining the narratives of co-researchers, researchers maintain "the internal frame of reference of the person who has had, is having, or will have the experience" (Moustakas, 1990, p. 26); thus capturing the co-researchers' stories from their own point of view. Six Phases of Heuristic Inquiry

Heuristic research divided into six distinct phases that help guide the direction of the investigation, and represent the basic steps in designing the research process. These phases include: (a) initial engagement, (b) immersion, (c) incubation, (d) illumination, (e) explication, and (f) creative synthesis. I discuss each phase in some detail below.

Initial engagement. According to Moustakas (1990), the initial engagement occurs when researchers become aware of an intense interest "that holds important social meanings and personal, compelling implications" (p. 27). During this phase, researchers are fully immersed in self-dialogue and self-exploration that guide them to tacit knowledge and creation of the research question. Thus, initial engagement further clarifies what the research question will be (West, 2001).

Immersion. In this phase, researchers become one with the topic and question of interest (Djuraskovic & Arthur, 2010). Moustakas (1990) describes this phase as penetrating all aspects of researchers' lives. As researchers *live* the question while awake, sleeping, or dreaming (West, 2001, p. 129), immersion evolves through self-dialogue, discourse with others, readings, and other possibilities that increase the understanding of the phenomenon (Moustakas, 1990; Sela-Smith, 2002).

Incubation. In this phase, researchers break away and detach from the experience (Alderson, 1998). While incubating, researchers focus on other interests; meanwhile, tacit knowledge and intuition collaboratively work to increase researchers' responsiveness to all levels of experience that are outside of their immediate awareness (Moustakas, 1990). During incubation "a seed has been planted; the seed undergoes silent nourishment, support, and care that produces a creative awareness of some dimension of a phenomenon or a creative integration of its parts or qualities" (p. 29).

Illumination. As researchers become more receptive to the tacit knowing and intuition, the illumination phase unfolds freely (Moustakas, 1990). Illumination occurs as qualities of the phenomenon and themes emerge from within (Alderson, 1998), increasing the researchers' receptivity to the new knowledge, interpretations, and meanings (Sela-Smith, 2002).

Explication. During explication, researchers engage in a detailed process of examination of themes and qualities of the experience that have emerged during the illumination phase (Djuraskovic & Arthur, 2010). Explication requires researchers to focus, indwell, self-explore, and self-disclose in order to recognize the uniqueness of human experiences. Through these processes, a more complete picture of the phenomenon begins forming and subsequently evolves

into a composite depiction – a collaborative narrative that includes multiple meanings of the phenomenon (Alderson, 1998; Moustakas, 1990).

Creative synthesis. As the last phase of heuristic research, creative synthesis is an artistic integration of all collected data including researchers' and co-researchers' experiences, themes, and stories (Moustakas, 1990). The creative synthesis can be presented as a narrative, poem, painting, or some other creative form. While capturing the experiences of co-researchers, creative synthesis is written from researchers' point of view. Rather than being just a summary of findings, creative synthesis goes one step further in guiding "the researcher back into self" (Alderson, 1998, p. 51), fostering the sense of connection and personal transformation (Sela-Smith, 2002).

Limitations of Heuristic Inquiry

I have chosen heuristic inquiry because I am personally connected to the phenomenon I wish to study. Although I value the focus on researchers' subjectivity and participation in heuristics, I had to keep in mind the limitations of heuristic inquiry.

Challenges with reflexivity. When conducting heuristic research, researchers are encouraged to become mindful of the particular challenges that reflexivity brings forward. In heuristic research, reflexive practice may turn into researchers' preoccupation with their emotions and experiences, and negatively influence the outcome of the investigation (Finlay, 2002). When researchers are primary instruments of inquiry, the risk of creating differences in power between investigator and investigatee may become significant (Etherington, 2001a). In other words, "the researcher's position may become unduly privileged, blocking out the participant's voice" (Finlay, 2002, p. 215). Researchers are encouraged to explore their own

reflexivity and consider whose voices in research are given primacy, and whose voices are extinguished (Stephenson & Loewenthal, 2006).

Challenges with representation of researchers' experiences. Despite the abundance of rich and unique stories that are provided through representation of researchers' and coresearchers' experiences, heuristic inquiry can be a demanding process. It requires a strict structure, careful collection of data, and detailed analysis (Frick, 1990; Moustakas, 1990). West (1998) pointed out that in order to conduct a heuristic study, researchers need to be able to: (a) identify an intense personal experience, (b) fully live the experience, (c) exercise patience during the heuristic process, and (d) face potential challenges in creating the final synthesis.

Heuristic process cannot be hurried; rather, it needs to follow its own course to the point of natural closing (Moustakas, 2001; Moustakas & Moustakas, 2004). Representation of researchers' experiences includes not only the positive insights but also self-doubts, mistakes, and embarrassing moments (Ellis, 1999). Researchers, who are not prepared to face the abovementioned challenges, may find themselves overwhelmed and overextended in the process. This may lead them to ignore or dismiss important insights, and reflect on their involvement with the phenomenon only superficially.

Challenges with essentialist focus. Moustakas (1990) noted that in the heuristic process, the researcher is developing a story about the essences of universally unique experiences. This notion of universality suggests that human experiences are there for human beings to discover and that they are a true representation of reality. However, heuristics does not take into account the larger factors (e.g., diversity, power dynamics, cultural differences, and societal frameworks) that influence how we make sense of our lives and how we create meaning from our experiences. Heuristic inquiry de-emphasizes the role of language and interpretation in

creating meanings from experiences and focuses on the simplistic idea that the researcher's self-disclosure about his/her experiences of the particular phenomenon will trigger disclosures from co-researchers, allowing for the human experience to be fully illuminated and understood.

Although uncovering the essence and meaning of human experiences may be an admirable goal, it is highly unlikely that a true nature of those experiences will be uncovered. Many researchers who have used heuristics note that they were not able to provide a full account of their experiences (e.g., Stephenson & Loewenthal, 2006; Turner, Gibson, Bennetts, & Hunt, 2008). Researchers' ideas and experiences should be viewed not as representation of external reality but as fluid and ever changing constructions that develop over time (Laverty, 2003). Researchers can never fully capture and explicate their experiences (Turner et al., 2008); rather, their stories represent the snapshots of their own unique reality.

In extending the response to the abovementioned challenges, I suggest that for every heuristic researcher, it is vital to address how he or she views the world (West, 2001). In the next section, I discuss personal conceptualization of heuristic inquiry and its application from a postmodernist perspective.

Situating Myself Within Heuristic Inquiry

For the purposes of this dissertation and in accordance with my postmodernist views, I chose to view co-researchers' stories, as well as my own as our interpretations of what was true for us, in a particular moment in time. All individuals who participated in this study offered their own version of reality related to their experience of counselling. This, in turn, offset an interpretive process through which each one of us made a unique sense of our world (Nuttall, 2006; Smith & Osborn, 2003).

Throughout this study, I maintained the view that human experiences can never be fully described, understood, and illuminated. I treated our counselling experiences as fluid, open to change, and not a true representation of "what is out there" (Laverty, 2003). Consistent with my postmodernist values, I interpreted our counselling experiences as "historically, culturally, and socially embedded" (Hiles, 1999, p. 4). I carefully recorded all of our experiences, keeping in mind the particular contexts in which they occurred. In this study, heuristics became a vehicle for creation of insightful stories that provided vibrant portraits of co-researchers' lives (Alderson, 1998). My experience represented the place of an initial encounter with the phenomenon of interest, and subsequently evolved into personal reflections of my individuality, experiential investigation, and systematic and rigorous pursuit of meaning (Frick, 1990; Hiles, 2002). I focused on self-dialogue and discourse with others to uncover underlying meanings of refugees' counselling experiences, in hope that it would facilitate co-researchers' own exploration of their worldviews (Morgan & Drury, 2003).

In this study, I embraced heuristic inquiry's position that values relatedness, connection to others and environment, and collaborative creation of knowledge. This position, in turn, allowed my co-researchers and I to tell our stories to each other, relive our experiences, create new meanings, and learn about ourselves through social interaction (Etherington, 2004a). To allow for collaborative construction of meaning, I interpreted our experiences as not only individual but also as mutually negotiated, social, and interactive.

I believe that when viewed from postmodernist perspective, heuristic inquiry allows for personal and professional transformation (Rogers, 1985; Moustakas, 1967, 1990, 2001).

Through an open inquiry, understanding of co-researchers' experiences, and subsequent return to myself, I transformed my sense of self, increased self-understanding and experienced

metamorphosis. I embarked on a personal and collaborative journey, and I co-created new insights and meanings with co-researchers (Djuraskovic & Arthur, 2010; Hiles, 2005; West, 2001).

Summary

Heuristic inquiry is a qualitative research method that represents a personal journey towards creation of understanding and meaning of significant human experiences. It requires creativity, compassion, self-exploration, and introspection to provide the deep connection to the phenomenon under investigation (Douglass & Moustakas, 1985). Through rigorous self-reflection, researchers explore personal experiences of phenomena under investigation, and subsequently engage in dialogues with co-researchers to explicate and synthesize significant meanings. Throughout the heuristic process, researchers are faced with disciplined pursuit of reflexivity, representation of their experiences, and creation of new meanings, while trying to acknowledge multiple contexts in which people live and co-create their personal, social, and cultural realities.

The Research Design

Heuristics is a demanding process that begins with the formulation of the research question and ends with creation of the synthesis. For this process to occur, careful preparations and development of methodology must take place. The research design, including the search and selection of co-researchers, data collection, interviewing process and data analysis, will be discussed in the following section of the chapter.

The Beginning

My journey began years ago when I first engaged in therapy as a client and experienced counselling in a very negative light. I held on to that experience and pretended that it was not

necessary for me to look at it any further. My ignorance and fear of the pain and hurt that I carried everywhere around me, consequently led me to another personal crisis. During that tumultuous period, I finally realized that it was time for me to engage in counselling again and address my refugee issues. It was my personal crisis that also led me to my research question.

Reflecting back, I could say that my immersion with a research question began in 2004 when I first engaged in therapy. I thought about refugees' experiences of counselling off and on between 2004 and 2010 but never paid a close attention about what that meant to me. My immersion with questions intensified during one day at work, when I suddenly decided to follow my heart and use a heuristic inquiry as a vehicle of telling my story and the stories of my coresearchers. When I finally made a decision to become a participant in my own research, I wrote in my journal:

Decision to immerse fully with my experience is a scary one to say the least. I keep shuffling thoughts in my head to justify my choice to once again open some of the most painful experiences I have encountered in my life. Have I made a right decision? Is there a right decision to be made? I don't know. I feel scared and courageous at the same time. This is a journey that I have to make for me and for other refugees that have experienced counselling. In many ways this journey appears to be somewhat of a pilgrimage towards creating a new reality and meaning about my own experience of counselling. It is a responsibility that I have to me, to my profession, and a particular culture to which I belong to – the culture of a refugee.

(Journal entry, June 21, 2010)

Site Selection and/or Population Selection

This research study was conducted in Calgary, Alberta. The search for co-researchers began in the Fall 2011. Moustakas (1990) suggested that in heuristic research, one might interview as many as 15 co-researchers. Patton (1990) noted that one should keep interviewing until the phase of *saturation* is finally reached, when all themes are explored in detail.

After pondering on how many co-researchers I should interview, I decided that the saturation of themes would determine how many individuals I would engage as co-researchers.

Although my committee raised concerns about uniformity of co-researchers' stories, the saturation was comfortably achieved when the new themes stopped emerging. The six co-researchers who selflessly volunteered to be interviewed met the following criteria:

- 1. They identified themselves as refugees/refugee claimants/asylum seekers who have lived in Canada 2 years or more;
- 2. They were of 18 years of age and over; and,
- 3. They have experienced counselling in Canada.

I utilized various methods to recruit co-researchers for this study. To advertise this research study, I obtained permission from counselling agencies, community centres, and immigration agencies, and posted recruitment notices on their bulletin boards. An example of the recruitment notice is provided in the Appendix A. By using a snowball/chain sampling method, I contacted (via telephone and/or electronic mail) various counsellors in Calgary who work with refugees, as well as community centre leaders who know potential co-researchers, and asked them to provide my contact information to them. An example of snowball sampling text is provided in Appendix B.

The volunteer co-researchers in this project contacted me through the abovementioned methods of recruitment. The interviews were conducted in settings that were comfortable for both co-researchers and I, and that ensured co-researchers' privacy and confidentiality. After all of the interviews were completed and no new emerging themes were identified, the point of saturation had been reached and the process of data collection was finished.

The Co-Researchers

Six co-researchers volunteered to participate in this research study. All co-researchers identified themselves as refugees, who have lived in Canada 2 years or more, were 18 years of age and

over, and have experienced counselling in Canada. Their personal information is presented in the table below. Please note that each co-researcher chose a pseudonym for herself to be used throughout the study.

Table 1

Co-Researchers' Demographic Information

Co-Researchers	Age	Education	Country of	Years in Canada
			Origin	
Lamija	41	College Diploma	Yemen	8
Andrea	26	College Diploma	Romania	15
Fatima	37	University	Bosnia	18
		Degree		
Milijana	40	University	Croatia	20
		Degree		
Lolita	29	University	Bosnia	15
		Degree		
Nera	37	University	Croatia	17
		Degree		

My Role as a Researcher

The nature of heuristic inquiry invited me to be fully involved in the research process. From the beginning, I participated in this research study both through self-search and self-reflection, as well as through a dialogue with co-researchers. I began this study with full immersion into my experience of counselling in order to understand its meaning. During my personal exploration, I kept a reflective journal, discussed my experiences with others, and consulted the research literature about refugee counselling, in order to increase my awareness and achieve insight into my experience. I also created a narrative about my counselling journey that I later used in the data analysis.

Once I completed my personal exploration, I began a dialogue with my co-researchers about their experiences of counselling. I used an informal conversational interview to capture

their stories. The informal conversational interview allowed for free flow of data and enabled co-researchers to share their stories in a natural dialogue. It was "consistent with the rhythm and flow of heuristic exploration and search for meaning" (Moustakas, 1990, p. 47). The interview guide is provided in Appendix C. I began each interview with the question – *What is your experience of counselling?* – and then instinctively asked the questions from the interview guide when relevant. I was personally involved in conversations with co-researchers to help express, elucidate, and reveal the experiences of refugee counselling (Moustakas, 2001). I also engaged in self-disclosure during interviews in order to facilitate disclosures from co-researchers (Moustakas, 1990). It is important to note that all co-researchers were fluent in English language and therefore, the interpreting services were not needed.

After all interviews were completed, I analyzed the content to identify important themes about refugees' experiences of counselling. During the entire research process, I kept a journal about our experiences. I also paid close attention to not steer the research in any particular direction, but instead listened carefully, reflected appropriately, and used self-disclosure when relevant. All data collected in interviews were transcribed, verbatim. After all interviews were transcribed, the data analysis began in order to capture the multiple meanings of the coresearchers' counselling experiences as they were emerging during our conversations. In accordance with the postmodern paradigm, the emerging meanings of co-researchers' experiences were viewed as fluid, flexible, ongoing, and open to change. Throughout the research process, I ensured that a safe and comfortable environment was created for co-researchers to openly share their stories. The co-researchers were informed that they were free to discuss any experiences they considered to be appropriate and relevant. Even though co-researchers were not legally bound to honour confidentiality, there were potential confidentiality

issues when it came to naming the counsellors with whom they worked in the past. To ensure counsellors' privacy was respected and anonymity embraced, I encouraged co-researchers to choose a pseudonym to use when discussing their counsellors or refer to their counsellors by their professional title. Periodically, throughout the study, I reminded co-researchers about the importance of keeping any third party information private. I also ensured that I did not use counsellors' real names or identifying information in any of my subsequent writings.

Data Collection

Before I began interviewing process, I reviewed with each co-researcher the purpose and guidelines of this research project, my responsibilities as a researcher, co-researchers' responsibilities, and confidentiality. A copy of an informed consent that each co-researcher signed is presented in the Appendix D. I answered any questions that co-researchers had about their participation in this research study. I focused on building the rapport with each co-researcher before beginning the interview process, to increase their comfort to share their experiences (Osborne, 1990). I utilized empathy, openness, and honesty to ensure that the appropriate working alliance was established (Hiebert, 2001). I made sure that co-researchers were aware of their rights regarding voluntary participation in this research project.

As previously mentioned, all data was collected using the informal conversational interview. Each co-researcher chose a pseudonym for her to ensure anonymity and privacy. This pseudonym was used throughout the research study. The interview began with a question – *What is your experience of counselling?* Subsequent questions pertaining to the refugees' experiences of counselling were explored. These questions included co-researchers' thoughts and feelings about what contributed/did not contribute to successful counselling, what factors complicated counselling process, and what specific therapeutic interventions and strategies

facilitated co-researchers' therapeutic engagement and healing. I also invited co-researchers to share any other information relevant to their counselling experiences.

Each interview lasted between 60 and 90 minutes. I recorded each interview using an audio tape recorder. I also kept a journal of my own and co-researchers' important disclosures that were relevant to data analysis. All interviews were transcribed, verbatim, by the professional transcriber who signed an oath of confidentiality. The example of the oath of confidentiality is provided in Appendix E. Although a professional transcriber was hired to transcribe the interviews, I was responsible for all of the facets of my research. I listened to audio-taped interviews carefully numerous times during my research in order to obtain a greater sense of the content. I engaged in self-exploration, self-dialogue, and reflective learning about both my experiences, as well as co-researchers' experiences. While in dialogue with co-researchers, I maintained their internal frame of reference to adequately capture their experiences of counselling.

After all interviews were completed, I asked co-researchers to reflect about the experience of sharing their stories in a research setting, and I answered any questions that they had about the interview process. I also provided co-researchers with information about counselling services in the community to access, should they experience any distress as a result of their participation in this research project.

Data Analysis

Moustakas (1990) pointed out that the data analysis may take any form until core themes and patterns of research slowly begin to show themselves and create a meaningful whole. I began with the analysis of my own narrative about my experience of counselling to illuminate central patterns and themes. I read my narrative several times and recorded any significant

themes that emerged. I also included the writings from my journal in the data analysis. As I fully immersed with my narrative, I was open to relieving my experience of counselling and I embraced the connection with the tacit dimension in order to increase my awareness and understanding of the experience that I did not have before. I relied heavily on examining my memories of the past as well as how they influence me in the present, which in turn increased my insight and allowed new ideas to emerge (Boyd & Fales, 1983). The goal of self-analysis in heuristic study is to achieve the sense that change took place and a point of closure was reached (Moustakas, 1990). However, my life experiences have taught me that closure is impossible to reach. Throughout this research study, I maintained the belief that understanding of my experiences can change, and that I can create new and more viable meanings of them. As human beings, we can never fully understand ourselves and our experiences because the world around us (including us) is continuously changing and evolving. Such dynamic required me to remain open to new horizons and learn to tolerate the ever present ambiguity. My hope, therefore, was not to understand my experience of counselling fully, but instead, engage in the process of selfanalysis and understand how I am integrating my personal and professional identities as a result of my experiences.

Next, I began analysis of co-researchers' transcripts. In order to make the sense of the data collected, I listened to audio-taped interviews, and I read through the transcripts and interview notes several times to get the general sense of each co-researcher's experience of counselling. I worked hard to remain mindful of my self-exploration as well as reflective process about our significant experiences. In addition, I reviewed each co-researcher's transcript sentence-by-sentence and highlighted all relevant paragraphs, statements, phrases, and words. I

coded the content of each transcript into significant themes. If particular content did not correspond to any themes already coded, the new theme was created (Nzojibwami, 2009).

Once all coding was completed, I developed a list of themes and proceeded to put them in a useful sequence that revealed the story of each co-researcher (Moustakas, 1990). I clustered similar themes, and, where relevant, categories and sub-categories of themes. The outline consisting of themes served as a template for writing co-researchers' stories about counselling (Nzojibwami, 2009). I recorded verbatim statements and paraphrases that best portrayed examples under each theme. I created an individual depiction of each co-researcher's story, as well as composite depiction about our collective experiences. As I integrated all of the themes, I remained open to intuition and tacit knowledge in order to understand and explain themes and patterns that I previously missed in the analysis (Moustakas, 1990).

Lastly, I developed the creative synthesis from the collected data. In heuristic research, creative synthesis is the stage of data analysis that allows the researcher to create a whole from the individual parts and distinct elements that emerged during the heuristic journey (Douglass & Moustakas, 1985). To create a meaningful creative synthesis, I engaged in a sorting-through process whereby I examined, sifted, sorted, and explored the data in detail and ultimately created a meaningful picture of our counselling experiences. In heuristic research, creative synthesis may be presented in any artistic form including poems, letters, pictures, and photographs (Moustakas, 1990). I worked collaboratively with co-researchers in choosing to present our creative synthesis in the form of a story about a refugee experience of counselling. I used a metaphor of experiencing turbulence in an airplane to paint the picture of our counselling journey. During the creative synthesis creation I maintained an open communication with all co-researchers. I inquired about their understanding of the emerging narrative and their feedback.

Once I completed the creative synthesis, I sent it electronically to all co-researchers. I invited them to offer their feedback about: (a) whether the creative synthesis captured their counselling experiences adequately; (b) whether they would like to add/remove any information; and (c) whether they have any other feedback regarding the creative synthesis. All co-researchers responded that the creative synthesis adequately captured their experiences of counselling and noted that they were satisfied with the final narrative. The full creative synthesis is presented in Chapter 5.

Trustworthiness

"Validity in heuristics is not a quantitative measurement that can be determined by correlations or statistics. The question of validity is one of meaning" (Moustakas, 1990, p. 32). Heuristic study is considered to be valid if the depictions derived from it accurately describe the meaning of the particular experience, as it emerges. Therefore, the validation of the heuristics rests with the researcher and his/her ability to confirm the study results with him/herself and with each co-researcher (Moustakas, 1990).

To ensure the validity of this research project, I continuously returned to data to check whether depictions, constituents, and qualities of the experience embody significant meaning. I engaged in "constant appraisal of significance" (Moustakas, 1990, p. 33), to ensure that all experiences are portrayed as accurately as possible. I continuously read and re-read my own narrative, journal entries, and notes I made during the explication of my story. I remained open to any new emerging understandings of my counselling experience. Whenever something of importance arose (i.e., a new theme and/or a new element of my experience), I carefully recorded it and incorporate it in my final narrative. Please note that the accuracy of the experiences recorded in this study refers to my own and co-researchers' interpretations of what appeared

accurate and meaningful at the actual time we were engaged in counselling. Throughout the study, I remained open to noticing all aspects of co-researchers' experiences in order to deepen my understanding of them. As new meanings were emerging, I recorded them in my notebook, and later shared them with the co-researchers to obtain the final verification of findings.

In heuristic research, verification and validity are ensured through the member checking process. Member checking requires the researcher to continuously return to co-researchers and share all significant meanings of the experience with them (Moustakas, 1990). To ensure validity of this study, I invited co-researchers to verify the findings. I included co-researchers in all phases of verification and validation. I asked for their feedback about the accuracy of thematic structures and interpretations, offering them an opportunity to disagree, agree, and change my depictions of the experience (Colaizzi, 1978). I sent individual depictions, composite depiction, and creative synthesis to co-researchers' electronically and I asked them to review the written materials and comment whether they accurately portray their experiences. To ensure further validation of my findings, I met with each co-researcher on three different occasions: (1) when all co-researchers' stories were completed; (2) when composite depiction was completed; and (3) when creative synthesis was completed. During my meetings with co-researchers, I invited them to comment on the material they read and offer their comments about what information they think should be excluded/included from the final dissertation narrative. In addition, when I completed the list of themes, I shared it with co-researchers electronically and asked them to comment on whether the themes corresponded to their experiences. After reviewing the list, co-researchers marked a *True* response for each theme that accurately depicted their experience, a False response for each theme that contradicted their experience, and a N/A response for each theme that did not resonate with their experience. After I received the

completed list from each co-researcher, I carefully reviewed their responses, included the themes that were chosen by the majority of co-researchers, and deleted the themes that received fewer than three *True* responses.

Moustakas (1990) pointed out that the one way of increasing trustworthiness of heuristic inquiry is the extent to which people can truly identify with the interpretation of the experience that researcher has written. Therefore, I shared my narratives with two personal acquaintances who identify themselves as refugees. More specifically, I shared composite depiction and creative synthesis with my acquaintances and asked them to reflect to what extent the information provided to them was relevant to their own experience. They both commented that they could relate extensively to both composite depiction and creative synthesis. To further verify my findings, I invited my dissertation supervisor to read and comment whether the narratives I produced resonated with her. I also consulted with my dissertation supervisor throughout this research project.

In conclusion, the ultimate decision about the trustworthiness of heuristic study is done by the researcher who is considered to be the primary handler of data. Therefore, I as the researcher, hold an incredibly big responsibility to ensure a thorough and:

continual apprehension of meaning, the constant appraisal of significance, accompanied by a running act of checking to be sure that I am doing what I want to do, and of judging correctness and incorrectness. This checking and judging and accepting that together constitute understanding are done by me and can be done for me by no one else. They are as private as my toothache, and without them science is dead. (Bridgman, 1950, p. 50).

Ethical Considerations

Respect for Dignity of Co-Researchers and Integrity in Research

This research study was approved by the Conjoint Faculties Research Ethics Board (CFREB). The copy of the approval is provided in Appendix F. The approval helps researchers to follow necessary ethical procedures and respect ethical principles that ensure respect for dignity of co-researchers. In addition, I approached co-researchers with non-judgmental attitude and empathic understanding to ensure that they were respected throughout the study.

Summary

This chapter outlined the heuristic methodology as well as its concepts and phases. It provided details about heuristic inquiry including its strengths and limitations, and a personal view of heuristic inquiry from a postmodern perspective. In addition, this chapter provided a description of the research design and possible ethical considerations. However, no matter how detailed description of heuristic inquiry is, one cannot grasp its power without co-researchers' narratives.

The narratives that are provided in the next chapter are depictions of refugees' experiences of counselling. They are written from the co-researchers' internal frame of reference and represent a vivid portrait of personal courage to access, engage in, and grow through the counselling process. My co-researchers not only opened their private lives in counselling but they also bravely marched through the process of struggle, self-reflection, and self-construction to ultimately create new meanings of their experiences and build more meaningful realities and lives for themselves. Their stories are outlined in Chapter 4. Please note that co-researchers' stories were extracted directly from the interview transcripts. Some content was removed to ensure the flow of the narrative.

CHAPTER FOUR: THE STORIES

"I go through all the lives I have lived, will live, and am living" (Paulo Coelho, 2011, p. 265)

Ivana: The Art of Letting Go

If somebody asked me to tell them why I went to counselling in the first place, I don't think I would be able to give them a plausible answer that would support my decision. All I remember was coming back to Calgary from my trip to Bosnia and feeling this profound fear, anger, despair, and rage. I arrived in Calgary in early June 2004, and for months after that, I was trying to find my feet back on the ground. The feelings of visiting Bosnia, the place I used to call home, have not settled yet, and as I was working on *normalizing* myself, I gradually became more and more restless. At the same time, I began my counselling practicum at the local agency, and quickly I noticed that I was not able to focus my thoughts on working with clients. I realized that I was entrapped in my own world, a world of a refugee, with no direction and no knowledge of how to proceed further. I wanted to finish my studies and begin a life. Only I was not sure what kind of life I was beginning. I increasingly became more attached to clients who were refugees like me, and detached from clients who were not. At the same time, I was experiencing a personal crisis. My marriage was slowly dissolving, and my desires to become free were presenting themselves daily. On one ordinary morning, I woke up, walked to my telephone, and dialed the number of a counselling agency. When I finally got through their intake office, I was asked why I wanted to start counselling. The question took me by surprise because I assumed that they would know that everyone who contacts them does so because of some personal crisis, unresolved pain, or some other unexplainable distress. I was quiet for a moment and then I replied: "I would like to tell my story to someone". The series of guestions that followed from an intake person were not really all that relevant to my reason for seeking help but I answered

them anyway. I was preoccupied with making sure that the counsellor I was being assigned to was open-minded, experienced, and understanding. I completed the intake process fairly quickly and was re-assured that I would get a call from a counsellor in the next 3 to 4 days.

I was waiting patiently for this call. I would consciously talk myself back into going to counselling every time when I doubted its usefulness. I argued with myself, and re-assured myself whenever I felt that I am betraying my intention to resolve the inner struggle that I was experiencing for months, perhaps even for years. When the call finally came, I enthusiastically made an appointment and penciled it in in my organizer. In my mind, such step was a beginning of an end. What kind of an end one might ask? An end of an era. An end of a life that I once knew. An end of me as I previously existed. A simple end of everything that defined me as person up until that point.

I remember walking into that counselling agency like it was yesterday. I was restless that day and somewhat apprehensive of sharing the most private parts of my experience. At the same time, I was excited that this process was beginning simply because I was not able to voice my pain ever before. I struggled with my experience of losing home, my war trauma, and my refugee identity for a long time. It affected every facet of my life and my development to the point where I was simply refusing to function. I was at the verge of losing everything once again, and I knew that I needed to give voice to this demon that was growing within me. So there I was, in a waiting room of a counselling agency. The minutes seemed like hours. I wondered how my counsellor would look like and whether we would click. I wondered what I was doing there and whether I would find answers that I was looking for. As I was caught up in my thoughts, I noticed this little middle-aged woman walking towards me. She appeared somewhat cold as she approached me and introduced herself. I shook her hand and followed her

to her office. What unfolded after affected me so profoundly that I vouched never to go back to counselling again.

As I was settling in the *client* chair, I could not help but notice that my counsellor was not looking at me. She was shuffling through the forms, and I remember thinking how I wanted her to get through them already so that I can begin telling her my story. My story was so important to me that it became the only counselling goal that I have had. Despite my eagerness to tell it, my counsellor was more focused on continuing with protocol. So we went through the forms, and finally I got the moment that I was waiting for – telling what I needed to tell. As I began talking about my refugee experience, I noticed that my counsellor was cold, guarded, and not very interested in what I was saying. She interrupted me frequently, and asked questions that I found completely irrelevant to what I was telling her. When I was talking about not having a home, she was asking me about whether I viewed Canada as good enough for me. When I was talking about not being able to feel connected to clients who are not refugees, she was asking me if I thought I chose the right profession for myself. When I was talking about the profound sense of personal loss and feeling insignificant, she was asking me if I thought I was struggling with low self-esteem. As the session progressed, I became more and more frustrated. I was bombarded with questions and statements that clearly were not reflective of what I was experiencing at that moment. Still, I continued telling what I felt I needed to tell, while at the same time feeling this profound confusion about what counselling really meant, if it meant anything at all. I looked at my watch on numerous occasions, wishing to speed up the time and finally get the heck out of there. I felt misunderstood and disregarded as a person. At the end of the session, I received a diagnosis of low self-esteem. I remember I laughed at my counsellor when she delivered it to me. I looked at her and wondered how is it that another human being

can be so detached from my experience and so focused on her own agenda. How could I have received a stereotypical label after just one session? How could I ever tell my story to this person who did not even understand what it meant for me to walk into her office? How could I ever heal from my pain when those who are supposed to support me in my healing process seemed not to understand my struggle and my need to converse with another human being? Since when did therapy become a counsellor's agenda and not a simple conversation?

I left the counselling office that day feeling confused, hurt, and directed towards some norm that defined my problem through a label that truly did not represent anything that I was battling. Nevertheless, I decided to give it another chance and return for the follow-up session. When I met with my counsellor again, I hoped that I would be given another chance to voice my concerns. However, just like the first time, this time around my experience was the same. I could not go along with her program, she could not go with me where I wanted to take her, and what was supposed to be working alliance between the two us disintegrated in matter of minutes. All I remember from that day is saying to my counsellor that the process was not working for me, and that I needed to leave. I got up, walked out, and never answered numerous telephone calls that she placed to me. For days after that I felt abandoned in my experience, and I often wondered if she ever truly understood how much she has damaged me, my belief in counselling profession in general, and my journey.

I have thought about my initial experience of counselling many times over the years. As I propelled myself in professional development, I often questioned if my experience of once being as client was somehow hindering me as a counsellor. Although clearly well-grounded in ethics and therapeutic boundaries, I could not help but notice that sometimes when working with refugees, I was leading an inner battle against the unpleasant memories of the two therapy

sessions that I have attended in the past. At times, I hid behind the therapist persona and denied the existence of such battle. Nevertheless, the idea of returning to counselling and possibly finding my healing path has never really left me. I have experienced moments like these before in my life when I tried to decide whether counselling would be a good option for me. They left me with infinite number of questions about what would be the purpose of undertaking such a step. I knew that I gravitated towards becoming a counsellor because I wanted to contribute to refugee healing. On the other hand, I became a client because I desperately wanted to find a way to somehow re-author my refugee story and re-create its meaning. However, whenever I tried to connect these two distinct parts of my identity (therapist/client), I felt incredibly angry – angry with myself, with my experience, and with counselling profession in general. For a long time, I could not understand why I was so angry. Only recently, I partially answered the question surrounding this strange love/hate relationship that I have with what I do. I loved it when I was a counsellor and I hated it when I was a client. This *counselling rant* has caused me many heartaches and I finally realized that if I don't find a way to resolve my counsellor/client dissonance, I will gradually lose my ability to be present, empathic, and open to working with others.

Constantly revisiting what has happened to me during my initial counselling has led me to begin the counselling process again 6 years later. How did I ever change my mind and even begin considering what it would be like to start therapy again? I knew I was not able to predict what kind of experience I will have this time around. I knew that I was fearful of feeling the same feelings again. I also knew that my emotional muscle was not toned and was not strong enough to handle another failure on my part. For 6 years, I ignored the problem that was habituating with me. I did that by focusing on finishing one degree and starting another. I also

did that by focusing on where I was the best – on my intellect and my ability to rationalize every obstacle in my life through intellectual reasoning. What was missing was emotional connection to myself and others. This emotional detachment became so profound that at some point I began experiencing myself as a machine that was incapable of any human connection.

So how did I decide to go back to counselling? Well it was a leap of faith I think. As I was growing professionally, I was stagnating personally. I was experiencing a slow death of sorts. It was so profound that, at times, I could not connect to anyone or anything that once mattered to me. I was driven by this force to succeed, while knowing in the depths of myself that such goal is unattainable because there is still unfinished business of my refugee experience lingering in the background. My second counselling happened somewhat unplanned. I came home from work one day, and I simply could not focus on anything that I was supposed to do. My heart was beating, my palms were sweating, and my soul was burning. I remember feeling this incredible fear of myself, of who I have become. I began shuffling through my thoughts, trying to intellectualize this momentary crisis that I was experiencing. However, nothing I tried to do was working. All I could think of was that I needed to tell my story. I needed to find someone who will listen to me and I needed to tell it. Why? Because for the first time in several years I was able to feel something, and that something was pain, and that pain was screaming to be addressed.

I spent the rest of that day laying on my living room floor and crying. Crying for the home I lost, for the people I will never see again, for the person I will never be again, for the innocence that was stolen, for the wounds that were inflected, and for the end of the only world I knew. The following morning, I got up, opened the yellow pages, found a counsellor, and booked an appointment. Somehow, I felt prepared to leap into the unknown and open myself to

possibilities of self-growth. What I hoped to gain was not a miracle, but a simple understanding that would possibly mend the incongruence between two distinct persons that were living inside of me: a counsellor and a refugee client. I was not hoping for closure or even a complete congruence of my identity. I was just hoping for a different lens through which I could view my world.

In September 2010, I began counselling again. I questioned the significance of telling my story at this time but I proceeded with my plan anyway. This time around; however, I have chosen a male counsellor who was in private practice, and had many years of experience. I based my decision on the superficial reasons including: I get along with men better, if I pay well for therapy, I should be getting something good in return, and the more experience the counsellor has, the better job he/she does. I was not wrong even if my choice was based mainly on *fluff*. What followed was a journey of self-growth, self-transformation, and an ending of an important life chapter. I can only hope that these next few paragraphs will capture an experience that has changed me in ways that I never thought possible.

It was September 24, 2010 when I began my counselling journey again. I was greeted by a pleasant office assistant and asked to have a seat in a small waiting room. She offered me coffee and smiled at me which made a world of difference. It was like she could sense my inner war and discomfort, and she made an effort to help just by being pleasant. The wait was not long and soon enough my new counsellor (which I will call Dr. C) has come to the waiting room to introduce himself. He was nothing like I imagined. He was young, tall, and somewhat awkward in his composure. He almost tripped as he was entering the waiting room, which made me chuckle and smile. As he approached me, he shook my hand, touched my shoulder, and walked me into his office. I remember thinking how nice and homey his office felt. We sat across from

each other, and Dr. C smiled at me, while at the same time talking about the busy traffic he was stuck in the whole morning. This small talk made me really comfortable. I don't know why but it just did. As the session began, Dr. C briefly covered the nature of the counselling process. confidentiality and its limitations, and had me sign the consent form. Then he put all of the papers aside, looked me straight in the eye and asked me: "How can I best listen to you today"? I was shocked by this question. I expected any other question but never in a million years was I thinking that he would ask me how he can best listen to me. His intention to do the best possible job was so meaningful to me that I just kept staring at him in awe. I finally replied with a simple: "Just listen". And I finally began telling my story. I talked and he listened. He nodded from time to time, never interrupted, and never questioned my need to tell what I was telling. That, at times, left me feeling confused, because I could not really comprehend that there was a person who has created a space for me to do what I needed to do. I kept telling and he kept listening and this exchange of human interaction continued for 5 sessions. For 5 hours I was recounting my experience. During that time, I cried, I laughed, I yelled, I protested, and I talked. Every time our session would end, Dr. C would thank me, tap my shoulder, and invite me to come back. This alone motivated me to continue doing what I was doing, and every time I left Dr. C's office I felt a little bit more complete. I did wonder though at what point this storytelling would stop and real therapy will begin. My wondering ended when one day during my session, Dr. C asked me what I wanted to do with all of the things that I told him. I was perplexed with this question because I was not quite sure what he meant. So I asked him what he wanted me to do with it. He looked at me, sighed, and said: "What you have come to do in this office is the art of letting go. Now that you have told me your story, it is time to let it go. Only I can't tell you what to do. Only you can know the depths of yourself and what you are prepared

to do". Up until that point I was not really sure if he truly understood my experience, my pain, and my struggle. However, what he has said that day made me feel truly protected and cared for. It seemed that in taking the time to listen with a pure heart, Dr. C allowed our therapeutic relationship to develop to the point where he could push me into the unknown using simple words, unraveling simple guidance, and engaging with me in my own re-creation process. He never judged my words, he welcomed my frustrations with gentle challenges, and he viewed me as a person first, and then as a client. He spoke very little in our session, which initially I thought would not work for me. However, in choosing to be the man of few words, Dr. C opened a space for me to engage in my own meaning-making process. He chose not to contaminate it with his opinions or therapeutic knowledge but instead cultivate it with purposeful questions at times when they were needed and with prolonged silences when they were called for. He taught me patience, courage, and self-reliance. Most of all, he facilitated my journey, while allowing me to move at my own pace. I continued therapy until late December 2010. During that time, I was able to re-author myself in new and more preferred ways. I came to terms that I am now a person with a new history, and that the possibility of returning to my old self is impossible and not very preferred for me. I was able to share a big part of who I was as a cultural being in therapy, and from that build a new identity for myself. Most of all, I noticed I was being more focused in my work with clients. I gradually stopped being preoccupied with my, what I used to perceive as never-ending refugee pain, and began understanding that what I went through contributed positively to my counsellor identity. I started thinking about counselling as a way of being, a particular presence not only in the world I shared with clients but also in my world. Was I completely healed? No. Did I become a new person? No. Did I

completely lose touch with reality? No. So what happened to me in counselling? I don't know. Maybe I just felt understood for the first time in a long time.

I last saw Dr. C at the end of December, 2010. We planned the farewell session and decided that I would engage in some sort of farewell ritual, a symbolic way of letting go of my problem-saturated story. For a long time, I was puzzled with this ritual and what I wanted to do. How symbolic can I make it to be? Finally, it came to me to write my own obituary. In fact, I don't think this obituary was written for me. It was written for a person that once existed in a world that was very different from this one. She was young, innocent, and happy. She was interrupted in her journey, hurt, and she died. She died the same day I left home. This journey was for her. On the day of our last session, Dr. C and I drove to the Queens cemetery and buried my obituary. It was cold and the ground was so icy that it was difficult to dig this little grave. But...I dug a small hole and placed what was left of the old me in it and I forever closed that chapter. Dr. C smiled, tapped my shoulder, and said: "Now you are ready to fight your next battle". Then, he turned around, got into his car, drove away, and I have never seen him again.

What made my counselling with Dr. C so meaningful? It is a question to which I cannot give one simple answer. I know that his therapeutic expertise was not important in our work together. I did not require some divine intervention or some miraculous therapeutic technique to bring me back to the right path. I also did not need a label attached to me in order to make sense of my struggle. What I needed was another human being to hear me and my voice. Dr. C provided just that – the space and time for me to tell the story. In the end, if one asks me if this was only about telling my story, I would with certainty say that it was not. It was about developing a relationship in a therapy room that was based on trust, respect for diversity and cultural difference, unconditional support, and the level of understanding so deep that it

propelled me to reach that part of myself that I believed was unreachable. It was about creating a connection-infused counselling process during which my limits were challenged in ways that allowed me to grow. It was about knowing when to just listen to me and when to push me for more. What resulted from it was an interesting kind of bond between a counsellor and a client, a bond that was bound to be broken by the mere nature of things...but a bond that will forever be remembered and respected.

I have not seen Dr. C since that day on the Queens cemetery. However, whenever I think of our counselling, my heart skips the beat. I remember my therapy not as something that was challenging but as something that was transformational. Now, I think everyone should take this word transformational with a grain of salt. My therapy was not miraculous nor did it create a completely new person. It was simply a journey that was not rushed but was nurtured until it came to the point of natural closing. Why did it work? It worked because there was a person in it that was willing to tell a story, and another person that was willing to listen to it. When we interact with each other in this world or another, we socially construct new knowledge and new understanding of ourselves, others, and the world in general. When therapeutic encounter becomes a simple exchange of words, where values are openly discussed, no judgments are passed, and problems are directly challenged, the end result is formation of a new reality. What kind of reality have I found? Well, I think I did not find a new reality. I think I created a new reality for myself. A reality in which my multiple identities are more in harmony with another, and where I can co-exist with others without feeling insignificant. In going through this process, I have become an artist of letting go. Letting go is not forgetting who I was, where my home used to be, or what happened. Letting go is simply a process of intellectual and emotional expansion. It is a process of strengthening one's emotional muscle so that it can carry the new

challenges and new pains. Human struggle is an inherent particle in human life. Without it, new meanings cannot be created, stories cannot be re-authored, and new realities cannot be formed. When a person can no longer sustain the fight, therapy becomes a vehicle for change, therapist becomes a co-driver, and the journey becomes collaboration. That is what I learned from Dr. C. In this world that I have subsequently re-built with his support, I can see endings, but I can also see the new beginnings, and the times in between. I am ok with that. I am ok with myself. And most of all, I am ok with therapy.

Lamija: The Art of Trust

My experience of counselling was that I finally found somebody that I can trust.

Someone to talk to about my problems, about what I thought was a very unique situation, and my cultural background. I found there were many differences between a Canadian culture, where I received counselling, from where I am originally from, Yemen, a Middle Eastern culture. I found my counsellor to be very helpful. She really helped me talk about my deep issues and problems, and things that I never really discussed with anyone. I specifically disclosed information about my family, how the women are treated in the Middle East, and how I felt as a first-born female in a very big religious Yemeni family.

I did not know much about counselling before I arrived in Canada. I kind of felt that Canada offered a lot to refugees and immigrants. I heard through the Immigration Society that there is some type of counselling that is offered for all immigrants and refugees. Additionally, someone I knew suggested that I should see a counsellor. I was hesitant at the beginning because counselling is really not part of my culture. I also feared my family because my family is very uptight and closed, and we don't even talk about our issues and problems. However, I thought I would give counselling a chance because I am in a new country and a different culture, and I

would like to assimilate. I guess I thought that going to counselling would help my assimilation process. Once I tried counselling, I decided to continue with it. The more hours I spent with my counsellor, the more it helped me. I think that was the main reason why I continued with therapy.

Initially, I did not expect much from counselling. I was very hesitant and it was weird to talk to the stranger about my issues. However, my counsellor made therapy very comfortable for me. She was very experienced and she gave me the time I needed. The questions that she asked were not imposed on me. Instead, she created a space for me to think about them and answered them at my own pace. There was no pressure of any kind, and there were no expectations of me in our therapy sessions. That allowed me to really open up and start talking about what was bothering me.

I think I attended 11 or 12 sessions in total. As the time progressed, I opened up more and began digging deep into my issues. I went as far back as my childhood. I think that actually helped me in the process of understanding myself. Nobody really talked to me about my early childhood before, or about relationship that I had with my parents. I never spoke to anyone, not even my friends or family members about what went on in my childhood and later on in my life. Nobody ever asked me about my past and my history. I think that the opportunity to tell my story in therapy made me feel close to my counsellor and helped me to better understand who I am.

Obviously my counsellor was a female. I am not sure if I would have a different experience seeing a male. I think it was definitely easier to open up to a female counsellor. Where I grew up and how I lived was different from Canada. In Yemen, males and females are very separated in education, family, or even socializing with friends. That is why I think I

processed things in therapy faster because my counsellor was a female, and I was able to relate to her on a deeper level. I think, in my head, that it is easier to relate to another female given my circumstances and the culture that I am coming from. In Yemen, women are very oppressed, and I think that my counsellor understood that. She was a professional and she took time to learn about my experiences to better understand them. She did not treat me like I am just another client case. Instead, she was more sensitive to my story and she had a capability to understand me both as a refugee and a woman.

I think that even in therapy, some feelings, thoughts, and questions can only be explored by a female counsellor. I guess women feel other women, and no man can ever relate to a woman in such a way. My counsellor understood what it means to be oppressed, to be forced to marry against one's will, or not to have any freedom. She understood what it meant for me to be forced to wear a hijab. I think she understood mainly because she is a woman, and that alone made me much more comfortable in therapy. I also think the questions that she was asking me were producing a special kind of relational energy between us. She made me feel very relaxed. She took her time to get to know me, and she gave me time to reflect on what we talked about and she did not rush me into giving her answers. Many times I did not even have a feeling that I am in a counselling session. I felt like I was sharing my story with a special kind of friend.

I believe that the way my counsellor talked to me was similar to what I was used to.

Back home in Yemen, people socialize differently. Young girls and women get together and share their stories. Older women get together, smoke shisha, and talk about things. They talk about their husbands, their lives, and the hardships they are going through. In many respects, there is a lot of female bonding happening. My conversations with my counsellor reminded me of back home because that is exactly how we used to share stories and support each other.

Sometimes, women even shared the deepest and darkest secrets about their lives in those situations. I think that through listening to my story, my counsellor mirrored my culture back to me. Talking to her created new cultural meanings for me, in terms of relating to another female.

The funny thing is that my counsellor was a Caucasian Canadian woman. At the beginning, it was surprising to me that she was able to relate to me on such a deep level. However, after a few sessions, it really did not matter if I was from Middle East and she was from Canada. I realized that women from all over the world could relate to each other. I do believe that all women are somewhat oppressed and are judged more harshly than men. So it does not matter where you live, Middle East or Canada, women still have similar experiences.

When I think back to how counselling impacted me, I am not sure if I can pinpoint when exactly my healing began happening. I think that halfway through my sessions, I decided that therapy is working for me because I felt better. At some point, I began looking forward to my sessions. Of course, initially, I was sceptical, and I questioned whether someone from Canada could even grasp what I needed to talk about. But...somewhere through the process, I realized that there were benefits for me in counselling. I felt better because I noticed that I felt relieved any time I shared my story with my counsellor. I guess I finally began making sense of all the things that were causing my suffering.

I have never been to counselling before, and I really don't have anybody to compare my counsellor to. I think it would be hard for me to answer what my counsellor specifically did to facilitate my healing. I guess the only thing that I can reflect on is that our therapy was not conventional. It was more of a lengthy conversation between two people who perfectly understood each other. I think her openness to my cultural background created a new way of learning for me. She was able to nurture my experiences and me without crossing her

professional boundaries. In that, she was very unique and very talented individual, and I think I am most grateful to her for being her own person. I felt like I knew her even though she never shared the details of her personal life. But she was sharing her opinions of what it is like to be a woman in a man's world. Sometimes she would agree with me, and sometimes she would disagree with me, but she always made me feel like I belong to a particular group of people – women.

One of the most influential things that my counsellor did for me in therapy was when she re-assured me that my issues were not my fault. She helped me understand that it was not my fault that my parents separated. It was not my fault I was born in Yemen. It was not my fault that I did not like some things about my culture. She allowed me to not feel guilty for rejecting Yemeni lifestyle. She supported me in working through my feelings related to my heritage, my family, and my cultural and religious beliefs. Being able to make my peace with my demons was the number one thing in therapy that made me feel good about myself.

I remember a session when we were talking about my accomplishments. I remember my counsellor reflecting on my humble attitude and my modesty, and how those may be preventing me from recognizing my abilities. She respected my fundamentalist Muslim background. However, she was able to help me understand how the experiences I had in my life can prevent me from acknowledging my own successes. Through our conversations, she made me realize that I am a worthy individual, who is equal to any man, and that my accomplishments are important. Most of all, she noted I should be proud of myself for what I have done. Nobody ever told me that I should be proud of myself. That was a huge thing for me.

Counselling affected my life in between sessions as well. I noticed I was more confident when dealing with men. For years, I was shy and I always felt inferior when in contact with

men. I was not even capable of standing up for myself, and I felt I should always raise men that came into my life on a pedestal. I think such attitude contributed to my shyness and my inability to take any credit for my accomplishments. I guess in a way I was not able to make my own decisions. Instead, I always allowed men to do so on my behalf. Something changed my attitude and me in counselling. The more sessions I attended, the more confident and secure I felt. I slowly began recognizing how much I was doing in my life, and as a result I began standing up for myself and sharing my opinions openly.

I think every human being experiences counselling in a unique way. We are all different and we all have our own ways of interpreting the world. In addition, coming from a country where counselling was not popular and was virtually non-existent, my therapy evolution for sure was quite unique and special to me. I remember that when I arrived in Canada, I experienced a cultural shock. Back home I was never alone, and I was never able to leave the house unless a male accompanied me. Somebody was always controlling my every move. When I came here, I felt liberated and shocked that such freedom was available to me. I was able to go wherever I wanted, I could look a man in the eyes, and I did not have to wear a hijab. I could do whatever I wanted to. That alone was a huge cultural difference. Huge. When I began counselling, I viewed it as a part of the new life and an essential component of my adjustment process.

I felt a bit of a cultural shock in counselling as well, primarily because I did not expect my counsellor to be a woman. I also did not expect a Caucasian Canadian woman. I assumed that I would see someone of a similar cultural background to mine. It was all strange to me at the beginning. I mean there was no counselling provided to me in Yemen. You could be the wealthiest person in Yemen and still you would not be able to find a counsellor for yourself. My expectations of counselling were the ones that you see in American movies. Crazy people going

to see a counsellor because they have something wrong with their brain. That truly scared me. Now, I can say that I did not experience any of those stereotypes. I am, for sure, a different person as a result of counselling.

I do recall feeling disconnected from my counsellor in the beginning. I worried about confidentiality, and how she would view me because I was so different. It was a challenge for me to begin to trust her because I thought she was completely clueless about where I was coming from. I even thought that going to counselling might be pointless. However, she accepted my insecurities and me fully and never questioned my motivations. I think at some point, as I was becoming more comfortable, I began seeing my counsellor as my role model. She somehow carved the way for me to become a woman in a full right.

I never felt judged or misunderstood in therapy. My counsellor never pushed me. She made sure I felt safe and comfortable to talk about my problems. The more I shared with her, the closer I felt to her. The therapy process became very personal for me. I was allowed to talk about what bothered me, to cry about it, and to express my feelings freely. I was able to tell her my secrets. In time, I realized that I have stopped judging her and viewing her as someone who could not possibly comprehend my world. Looking back at our process, I can say with certainty that it was not her who was judging me; it was me who was resisting the therapy process. She was so warm. Even when we had disagreements or differences in opinions, she never passed any judgment. Sometimes I felt guilty for disagreeing with her. Sometimes I felt angry. In the end, I realized that helped me put my feelings of shame on a surface and subsequently challenge them. It was all a big learning process for me. I think learning to use the freedom that I suddenly gained in Canada was partly channelled through counselling. I guess what I am trying to say is that my counsellor mirrored a different kind of reality for me, and a different way of

being a woman. I decided to leave Yemen and my family because I could not live a fundamentalist life. I became a refugee, a recluse, a person who would later claim a refugee status in Canada. Part of me already believed there was a different kind of reality waiting for me. However, the road to that reality was difficult and painted with guilt, shame, and fear. I felt liberated and dirty at the same time. Had I not gone to counselling, I would have never been able to rebuild my identity and myself.

I gained many new insights through counselling. I think my counsellor played a major role in reconciliation of my inner child with my adult self. She connected me to my childhood experiences and helped me relive them in a different way. She taught me how to protect that little girl that was living inside of me. She also facilitated the process of forgiving my parents for forcing me into a lifestyle that despised. I finally understood that it was not their fault either because they were the product of their culture. They did not know any better. I guess telling my story to someone who was neutral allowed me to make a choice to be happy. Now I live my life as a strong independent woman. I use my abilities fully, and I am open to exploring all of the facets of this new life. I have achieved my internal happiness — a happiness that comes from within and paints a brighter future. I am in control now. My past does not define me. I define me.

If I had an opportunity to thank my counsellor, I would thank her for taking my guilt away from me. She guided me in shedding the cape of shame. She related to me as a human being, and she helped me to grow up. She did not look down on me because of my culture, and she did not feel sorry for me. She accepted me the way I was and the way I was becoming. I think in some ways she learned from me too.

When I think about what counsellors need to know in order to support refugees adequately, many things come to mind. I think it is very beneficial for counsellors to learn about the cultures of people they are counselling. Counsellors need to be able to modify their approaches to fit different cultural backgrounds of their clients. I mean my Yemeni culture is different from someone who is from Rwanda. I think that refugees are very different, and they come to Canada from all over the world. Sometimes they don't know the language, sometimes they are lonely, and sometimes they are depressed and misunderstood. Sometimes they don't have anybody to lean on and the counsellor may be the only friend they have. I guess what I am saying is that counsellors should be sensitive to refugees' unique needs. They need to educate themselves about refugees and understand that most of us are just truly hurt souls who are looking for answers. I think counsellors should also be sensitive to women from different cultures and try to accommodate them in a best way possible. The most important thing is to match the refugee with a right counsellor.

In the end, I would like to say that I would encourage all people to try counselling. Even though counselling may be weird in the beginning, if you give it a chance, it can truly change your life. It certainly changed mine. All refugees should be informed that counselling is available to them. This would make counselling more accessible to them. Maybe therapists themselves could talk to refugees and let them know what counselling is and how it can help them. Even though it may be contrary to people's cultural beliefs, they may still decide to try therapy. That is why I decided to talk about my experience. It makes me very happy to know that my story will be shared with others. I think that if my words can touch even one person, that is a success. I hope that my story will eventually help other refugees realize that there are benefits in counselling, and allow them to live healthier lives, and re-claim their identities.

Andrea: The Art of Self-Creation

When I first came to Canada, I was pleasantly surprised to know that counselling was offered to refugees. I found this out through the Immigration Society. I was excited to know that therapy was available for refugees from all over the world, including Romania. I began counselling sessions two months after I arrived in Canada. The experience was good for me. Knowing that I could talk to somebody who could understand the point of view of someone who came from a foreign country and was facing all of the problems of adjusting to the new society. I really appreciated the fact that I was offered a great advice with regards to many of my problems. Once again, those problems were related to my overall adjustment to Canada, but they also included encountering the new society, searching for a job, and learning about how to find appropriate housing for myself.

My decision to go to counselling was born out of loneliness. When I arrived in Calgary, I did not know anybody. I struggled with finding my place here, and I thought that counselling perhaps is the best option for me at that time. I needed some guidance and support from whoever could offer it. Going to counselling was also a good chance for me to see what kinds of services were being offered in Calgary. Looking back at my decision now, I know that it was the right thing to do at the time, and I am very thankful that I was able to learn new ways of coping with my move to Canada.

I attended counselling for about 8 months together. Being in therapy genuinely allowed me to address each step of my coming here. It also helped answer many of the questions I had about issues I was experiencing. I was attending sessions at least once every 2 weeks, and talked about any problems that I was having at that time. My counsellor was very open-minded. He had extensive experience working with immigrants and refugees. He understood my cultural

background and my European status. In addition, he was very informative, he knew how to guide me, and what direction was best suited for me.

When I first started thinking about counselling, I was quite sceptical because I did not know what to expect. I worried that the counsellor would not understand my cultural background. In other words, I was not sure if he/she would be able to put him/herself in my shoes. I was not sure if he/she would even understand what it was like for a newcomer to come here as a refugee. However, as I got to know my counsellor better, I realized that he was able to understand my story. As he was showing his understanding and acceptance of me, I was becoming more open-minded, and I was able to express myself and my issues openly. He was just very comforting and I enjoyed all of the sessions I attended.

Looking back at how my counsellor was, I must say that he showed a particular way of listening. In our therapy sessions, he always listened to my story from the beginning to an end. He was very patient, which in turn made me feel at ease. I also learned a lot of about my own life story. I remember feeling very free in the counselling environment. It was important for me to feel calm, secure, and safe, in order to be able to disclose my struggles and problems. I think that my counsellor's patience played a major role in how I viewed therapy. He was providing me with many good directions in terms of how I should or could solve my problems. For each of my problems, he directed me in the most appropriate way. He was able to understand where I was coming from. He was also always available to me. I knew he was there for me, and that he was that one person that I could talk to with ease about anything.

I think that, most of all, I truly appreciated that counselling was confidential. In my sessions, I never felt that my story was judged. Instead, I felt really comfortable. My counsellor's advice was non-threatening and non-judgmental. I was there to tell my story, and

he was there to listen. He was helpful to me because he approached my problems in a professional manner. He was like a professional friend of sorts...not really there to tell me what is best for me but to help me see the whole picture. I think in that sense, he was able to relate to me in a different way than an ordinary friend would. He also understood my cultural background. I must say he was really experienced that way. His expertise was evident in that he treated my story as very unique, and it did not matter to him that I came from Romania. He viewed me like a person, and he treated me no different from anybody else. He had a vast understanding about cultural diversity, and I was very pleased that he knew a lot about different cultures including mine. He made me feel like I am my own person, and not like somebody who is an outsider in Canada. Showing me that I am no different from an average Canadian made me real comfortable in therapy. I never felt isolated with my issues. Instead, I was able to be myself and comfortable in my own story. That is when I knew that he truly understood me.

I think that my counsellor was very open to me and he opened the space for me to talk about things that I would not talk to anybody about. He offered me his support no matter what. I could call him any time during the day, and I knew he would make time for me to see me if I needed to be seen. I booked appointments with him as I needed them, and he accommodated me in any way possible. He also provided me with contact information for other available resources that I could contact if he was not available to see me.

When I think about what kind of person my counsellor was, I can say that he was like nobody I ever met before. Over time, I learned that he was a trustworthy individual, and that I could count on him to answer my questions and offer support. I just knew that I could trust him. As our relationship grew more, it became evident that he was the right counsellor for me. We never engaged in conflict of any kind, which was very important to me. Even when he could not

help me directly, he always made sure that I had services available to me. I have a medical condition that he obviously could not address with me in therapy. However, he knew what information to give me, and how to point me in the right direction.

I think overall therapy was a good experience for me. At the end of my sessions when I felt strong enough to act on my own, I knew I would be fine. I took his advice and his guidance with me and put it in action. When I was ready to confront life on my own, I stopped going to counselling. Nevertheless, I still felt secure knowing that he was available for the follow-up session. He was just a phone call away if I needed him. So when I was ready to face my life alone, I decided it was the time to stop therapy, while I still cherished the fact that I could go back to it any time I wanted to.

I never once felt uncomfortable with my counsellor. He never pushed me to talk about things that I was not ready to talk about. Whatever I was comfortable sharing with him, he welcomed. He was never too inquisitive, and he never made me uncomfortable sharing anything that I was not at ease with. He was very professional in a sense that he knew exactly what questions to ask. He knew when to probe into an issue, and when to leave it alone. For me that was a turning point because I knew that my trust in him was building more and more. I knew he was prepared to listen to me whenever I had something to say. As a result, I became more and more comfortable as the time went by, and I never felt like I had to disclose more than I was ready to share.

I remember thinking that in Romania, I would have never went to counselling. My ideas about therapy changed when I came to Canada. I finally realized how easy it was to sit with somebody who would listen, and share my story fully. Not being judged was a big thing for me. It really changed my view of counselling in general. Now I know that even if I experience any

problems in the future, or if I become confused in someway, the help is available. I think that over time, I became outspoken about therapy, and it is something that I would openly recommend for my friends and family. I think people need to be open-minded about therapy. Whenever they experience issues, they should not hold back, and they should trust the therapeutic process. In order to heal, one has to be prepared to tell a story, and be prepared to have someone listen to it. If a person has a positive attitude towards therapy, it will work wonderfully.

Therapy was a mind-opening experience for me. I never dreamed that Canada would offer such great services to me, and that my whole mentality with regards to therapy would change. I know now that I am not alone, and that there is help available to me should I ever struggle again. It definitely changed my way of thinking about what kind of help a person may need in their lifetime. Today, I am definitely more open-minded and not as sceptical as I used to be. I am no longer scared to open up to a complete stranger because I know that therapists and counsellors are very professional, and are trained to the best of their ability to address my concerns. I just felt so comfortable in therapy that I now know that is the best way for me to go if I ever feel trapped again or have nobody to talk to. For sure, therapy is a good option for me. It was rewarding to know that there was somebody there for me who knows me well and yet is not a personal friend or a family member.

The opportunity to tell my story in counselling was very rewarding for me. It opened me up to the world. I am not a person who really shares a lot with people. I am a private person and I keep my problems inside most of the time. However, through therapy, I have found who I am. I was able to take things off my chest in a way that might have been uncomfortable sharing with a friend. I was always scared that my friends would judge me. Now, sharing with a therapist

allowed me to fully open myself in a way that was comfortable. Therefore, I think that my decision to go to therapy was a right one. When I struggled with issues in Romania, counselling was not available for me. I think in Canada we have certain freedoms that we did not have in Romania. I would have never been able to express myself fully in Romania. That was never an option. Romanians are not very open to counselling. If I went to therapy in Romania, people would have judged me. They are close-minded back home. Here, on the other hand, psychological issues are seen as important. No matter what the problem is, the help is always available. That was a huge difference for me, to see that counselling and therapy are appreciated in Canada. There is no stigma here, and that is perhaps the result of a more modern thinking. We all go through life, and to have the opportunity to have someone to listen to our story and offer advice, I think that should be available for everybody.

For therapy to truly work, I think it is first important to find a right counsellor. I was assigned to my counsellor and I was lucky enough that he was the right counsellor for me. I have never felt that comfortable with anyone before. Maybe the fact that he did not know me personally helped. Whatever the case may be, I enjoyed the time spent in therapy. His advice and guidance made sense to me. He understood my cultural background, and he did not judge me. That helped a lot and the fact that he was available to me at all times. He also directed me very well in how to address each one of my issues. It was very helpful for me to feel validated and understood.

I think that it is also very important to have a very experienced counsellor. My counsellor was very welcoming to me. I think the fact that he had two daughters that were close to my age helped him relate to me more. He was almost like a pseudo-parent to me. To him, I

was a person, not just a patient-number. I was treated as a human being and that alone allowed me to be at ease and share my story openly.

When I think of the advice I have for Canadian counsellors, I would have to say that it is important to know your patient's cultural background and how different it is from Canadian culture. People's values sometimes can be different. Counsellors should be open-minded about the fact that some people have never been in therapy before. They should create safe environment and respect confidentiality. They should understand where the people are coming from and suspend their judgment about their issues or backgrounds. The more experience counsellors have with people from different cultural backgrounds the better. Canada is such a diverse country, and here there are people from all over the world. However, at the end of the day, we are different but we are still people, and we still want the same things. We come here with similar issues and problems, and we are not that different from anybody.

In the end, I think I can say that therapy for me is a place of comfort. In a therapy session, I can be in a complete state of openness and free to work on my issues at my own pace. I would recommend therapy to any newcomer to Canada, and any refugee because I had such a good experience. My problems were resolved, and I found my answers. I managed to get to a good place with the help of my counsellor. Most of all, therapy was available to me in one of the hardest moments of my life. Coming to Canada was a big and lonely change for me. Knowing that I had somebody to talk to about it was priceless.

I had a great experience being in therapy. In a way, talking to a counsellor demystified the whole counselling process for me and it really opened the doors to the world for me. I stopped thinking of myself as being a problematic person, and started thinking of therapy as a

process through which I was able to grow and expand as an individual. Therapy opened my mind to future opportunities, and I would recommend it to anyone in a heartbeat.

Fatima: The Art of Healing

Counselling really helped me cope with issues that I went through in my life. Leaving Bosnia, being a refugee for over a year, and coming to Canada was a difficult experience. There was a lot of things that I went through, and I experienced numerous changes like being apart from my family, and going through difficult situations. I think that counselling helped me pushed through these problems, get it all together, and learn to deal with certain issues on my own. In fact, I think going to counselling allowed me to deal with problems and the surroundings that created them.

When I called a counselling agency, I was struggling with issues related to both my past and present. I heard that counselling was available from a few colleagues at work. I also had friends from back home, who attended counselling. They told me that it was really helpful for them. At the time, I felt that I really needed someone to listen to me. Someone who was not directly involved in my situation. It seemed like a good idea to have an outsider hear me out and guide me in overcoming my problems. I truly needed all the help and support I could get to resolve my issues, accept my life the way it was, and move on.

Initially, I was sceptical about counselling. I was not sure what kind of help I was going to get and whether it would be worth it in the end. I used many excuses of why I should not go to counselling and I even said to myself that I am too busy for therapy. I think that at that time any kind of consultation or initiating counselling was too challenging for me. However, I knew that I was making excuses because I knew it would be difficult for me to talk about the things I experienced. I was used to burying it deep inside of me and not think about it. But...every once

in a while the bad memories would haunt me, and I was tired of running from them. I wanted to be free of them and going to counselling was an only option. I was scared though – scared of opening up, reliving my traumas, and talking about my pain. So even now when I reflect on that, it was a very difficult choice to make to go to counselling.

My first session was sort of very general. My counsellor just listened to me, and only asked me a couple of questions. I was the one that was talking the entire time. I think I just wanted to get my story out so I can make a sense of it. For myself. That first session really helped me because I was finally verbalizing the terrible things that I had kept inside for so long. Just being able to talk about it helped me cope with what was coming.

I am not sure if I can say that counsellor was overly helpful. The counselling process was more meaningful for me. I guess my counsellor guided me in a way to put my story together in my mind and finally tell it. She allowed me to see where I am and where I need to go. She also helped me understand what has happened to me and why it has happened. So I guess my counsellor did not have an agenda to help me resolve my issues by giving me advice. She was actually helping me find my own answers and resolve my own issues.

I remember my counsellor being really inquisitive. She asked me many questions that pushed me to sort the mess in my head and put all of the pieces of the puzzle together. Even though she did not impose her opinions on me, talking to her was really helpful. She did not know anything about my life, but she understood me. That alone allowed me to clear my head. I figured out how things that happened affected me, and I answered some difficult questions I had for years. I guess I knew what I needed to do for myself all along, but sharing it with another person really put it in perspective.

I attended 12 counselling sessions. At first, I was hesitant about opening up. I felt I had too much pain in me. As the time passed, I began trusting my counsellor. I appreciated the fact that she kept my information confidential. She was also there for me and did not judge me. She listened to what I had to say, and over time I realized that she is there to offer support and help me develop good coping skills. Even when I doubted the confidentiality, she took time to reassure me that my information will never leave her office. I guess I had some fears about signing forms at the beginning of counselling. It was really helpful to know what they were for, and that my dirty laundry will not be aired publicly. That really facilitated my therapeutic process.

I used to never talk about my problems. I always kept everything inside. Opening to a complete stranger opened my eyes and made me experience world in a different light. I noticed that it was not so difficult for me to talk about what was bothering me. My counsellor allowed that to happen, and she made me feel that I am not the only one with problems. She also created a sense of hope for me, and made me realize that going through tough times did not mean that I would not find solutions.

When I reflect back on my counselling, I can say that there were some cultural differences between my counsellor and me. I was coming from a completely different culture, and I assumed that she would not understand my way of life. At times, I felt that she could not understand my point of view, and that she was not clear about some things I was telling her. I did not hold grudges against her. I just figured that our cultures were too different. Sometimes, I even tried to present myself to her in a best possible light so that she could understand me better. Over time, I realized that she wanted to learn more about my culture, and that she was not clueless.

As my trust increased, I took time to explain to my counsellor some things related to my culture. I don't know if she understood it correctly, but it seemed that she was open to listening. Maybe she did not understand my way of life. However, she was willing to hear me out. I was never frustrated with her. I actually understood her because I was beginning to understand Canadian culture better. The more conversations we had about our differences, the more we related to each other.

I think one of the big things that affected my therapy was my religion. It is so different from other religions that I was always afraid that other people would not be able to comprehend it. I truly grew up differently from people here, and as a woman I did not have much freedom. There were certain rules that I had to obey without protest. Here things are different, and freedom for people is endless. There are no rules for women to follow, and there is no undue pressure imposed on them. I was raised in a culture where I thought that oppressing women is a normal thing. When I shared this with people in the past, I was told that I experienced discrimination. I did not think that was my experience. That was just the way of life. So I tried to explain this to my counsellor, but I am not sure that she was on the same page as me regarding this issues.

I began healing my wounds when I realized that there is nothing wrong about disclosing my pain and bad memories. I gave myself permission to feel bad, and I recognized that I have survived some of the most horrific things that a human being can go through. I figured that I am healthy, and that I am capable of putting my past behind me, and create a new life in the new country. Canada gave me endless opportunities for a better life. Going to counselling made me realize that. It also allowed me to reflect on my experiences in a positive way. At some point, I stopped just coping, and I started living my life fully.

I don't think that counselling would have been helpful if I was not able to build a trusting relationship with my counsellor. The most helpful thing that she did for me was offer me an alternative point of view. That alone enabled me to look forward to my future, and leave the past behind. I also learned to look at bad experiences from a different perspective. I think I was ashamed of what has happened to me. My counsellor validated my feelings, listened patiently, and led me in a more useful direction. She was like a professional friend of mine. I always refrained from sharing my problems with my friends for the fear of being judged. Being able to talk about my darkest secrets with person who knew nothing about me protected me in a way. I told her things that I never told anyone else. That really made me feel better. On a top of that, she did not judge me, and she was not biased in any way. I respected that about her.

The one thing that affected my counselling was my busy life. I often could not find time to go, or I had to cancel my session because life just happened. I don't think that affected our work together too much. We would reschedule and move on. What was interesting was that I would think about our conversations between our sessions, and I was making changes on my own. I treated it as a counselling review process. I guess my counsellor taught me how to be my own therapist.

Looking back now, I don't even know why I was so resistant to going to counselling in the first place. I definitely benefited from it, and now I look at life from a completely different perspective. I am sure that even if I didn't go to counselling, I would have resolved my issues eventually. However, my hunch is that I would have ended up feeling depressed, and getting better would have taken too much time. When I started therapy, I was at the breaking point. All I was doing was reliving the past. I was neither thinking about my present nor my future. I am

glad I went to counselling because if I didn't I would still be stuck with issues that were taking over my life.

Counselling helped me create a narrative of my life. I learned to think for myself, and talk to myself in a healing way. So even though I say that my counsellor did not help me, I think she did. She gave me my power back so that I can think for myself and make my own decisions. I think I was kind of lost when I met her, and she helped me find my way again.

Telling my story was powerful because nobody can tell my story better than I can. I think if my counsellor just answered my questions and gave me advice, I would not have gotten better. I needed to be my own person, and I needed to tell my story in way that worked for me. So while I was working on telling, she was providing me with a framework within which telling became more meaningful.

Finding a right counsellor is extremely important. I was really lucky I think. My counsellor was warm and genuine. As I was telling her what has happened to me, she mirrored back to me that she feels what I feel. I guess she was putting herself in my shoes, and was trying to understand my point of view. I felt that she wanted to know me, and she viewed me as a person. Another good thing was that my counsellor was easily accessible. She was located downtown and easy to get to. I attended counselling every 2 weeks, which was quite convenient for me because it gave me time to work on my problems between our sessions.

I think that counsellors need to be open to learning about what refugees go through. My counsellor was not particularly knowledgeable about my culture and the war that happened in my country. I think this is important for counsellors to know. Maybe there should be some kind of questionnaire for refugees to fill out before they go to counselling. That may help counsellors

get specific information ahead of time and not go into counselling sessions with people blind.

Knowing about different cultures, religions, and politics would really help.

I do believe that counsellors face many restrictions when it comes to their ethics. They have their professional boundaries, and approach people in a certain way. That is not always helpful. I think that sometimes crossing some boundaries can really help counsellors build trust with refugees. My counsellor was very professional. I hope that she understood that she has helped me a great deal. I would hope that in the process she gained more confidence about working with people from different cultures.

The funny thing is, I became a big supporter of counselling. In Bosnia, I would not have dared to go to counselling. I would be afraid of being seen as crazy person. People back home would for sure judge me if they knew I went to therapy. I would have never put myself in that situation. In Canada things are different and counselling is not viewed negatively. The problem is that many people from different cultures do not know that counselling is available. Or they do not go because they think they would be labelled as mentally ill. I think people should be educated more about what psychologists do, and what counselling is all about. I think if that happened, people would be more open to it. I guess not speaking English can also be a problem. I would say it would be important to locate counsellors who speak different languages. Knowing that there is a professional help out there in your language makes a huge difference in people's lives.

Milijana: The Art of Reclaiming

My first contact with counselling was in Canada. I didn't find any value from it in terms of dealing with the trauma that I had. I was sexually assaulted in Croatia and I found a counsellor that didn't inspire change in me. I mean, in my country psychologists were in suits,

very professional, and very guarded. In Canada, counsellors were different. When I met my counsellor here, she was in a long flowing skirt, her hair parted in the middle, and she looked like a hippie. There was no way that I could have trusted her with my story. I did talk to her, but I think that she did not do a very good job as a counsellor. She listened, and she occasionally giggled. That was not the help I was looking for.

What bothered me was that I decided to seek counselling help on my own. I don't know if it is a common experience with women who have gone through sexual assault to seek counselling. My trauma changed me fundamentally and I did not like what was happening to me. I had flashbacks, I could not be touched, I could not trust anybody, and I was very self-destructive. At that time, I did many things that I am not proud of. When I finally asked for help, I encountered someone who I could not relate to. After my experience with my first counsellor, I left things alone for a very long time. I felt like there was no hope. I believed that every counsellor out there was like her.

I decided to go to counselling because I felt that if I don't address my trauma, my troubles would never go away. It was difficult because in my culture we are supposed to suck it up, not deal with things openly, and just move on. When I came to Canada, I learned that people go to counselling openly to address their problems. So I went too. They assigned me to this woman, and she ended up not helping me. I felt like I was talking and talking into an empty space. When I think about it, I could say that this didn't work because we came from two different cultures. I just felt I could not look up to her. It bothered me how she approached me, how she talked to me, and how she looked. It was a terrible thing.

In Croatia, we did not have counselling. We had psychiatrists. In Canada, you have psychologists, counsellors, social workers...it's a branch on the same tree. I guess my

expectations were not met when it came to what I wanted out of therapy. I needed someone who would identify with me, and try to be a bit more accommodating to me or my feelings. So I ended up having only two sessions with my first counsellor. But this did not stop me from counselling. After a while, I began understanding that there are different kinds of therapy available. Then I went and found somebody who was better. Somebody who was a little bit more sensitive to what I had to say, and who was a bit more responsive to me.

I never stopped wanting to make things better for myself. I knew I was just surviving and not living, and I wanted to feel alive again. I wanted to trust again. When I decided to go to counselling again, I was not as bad as I was when I first came to Canada. I just wanted to get more out of my life. This time I went to counselling once a month for a full year. When I met my new counsellor, I was glad that she was not Canadian. I was also glad that she was not Croatian. That in itself made me think that she could provide me with a different kind of reality. I trusted that she would know how men talk to women if she was coming from a male-dominated culture. I also hoped that she would understand where I was coming from. This was confirmed when I talked to her first time. She did listen to what I had to say, and she did ask questions. She guided me to some of the most significant epiphanies and you know it helped. I would come home after our sessions, and I would cry sometimes. I would cry for hours but over time it got better. It got a lot better. My counsellor sort of guided my story that needed to be told.

As the time in therapy progressed, my counsellor became more involved in helping me. I remember when I walked into the office the first time, it was just an office. My counsellor introduced herself, she was dressed appropriately, she was assertive, and she was not pushy. She allowed me the space and time to talk. I think therapy is actually about getting to see where you're thinking wrong. I had many beliefs about my sexual assault that my previous counsellor

did not challenge at all. For the longest time, I felt that what happened to me was my fault. I felt dirty, I felt that I was used goods or damaged goods, and I felt like no one could ever love me the way I was. My new therapist actually challenged those beliefs. She helped me to see that maybe it was not my fault. She did not assume anything. She did not assume that I understood Canadian culture or anything like that. She actually tried to find out where I was coming from, where I was situated, and then worked with me from there.

I felt connection with my therapist during my first session. That was probably the reason why I kept going to see her. There had to be some trust there. I am telling somebody about the damaged parts of me. And I felt this person was someone who might be able to do something for me. She assured me with her questions, and it appeared that she was really listening to me. She was not just sitting there and nodding her head. I felt safe with her. She did not push me and she let me explore my experiences at my own pace. Even today, I still have a hard time talking about my sexual assault but you know with her, it was different. She did not ask me for details. She let me talk about things that I was comfortable with. If she did not understand something, she asked for clarification. She helped me say my words in a different way until I understood that maybe the way I was thinking was not the most preferred for me.

As I was getting used to Canadian culture more, I also began understanding the therapeutic process better. Maybe I was just ready for therapy at that particular time. There was something about my counsellor that made me click with her. She didn't make me feel judged. Even after I talked about everything including the sexual assault, she never made me feel bad about myself. Instead, she helped me understand that the feelings I was feeling were part of the healing process, and that allowed me to view the sexual assault from a different perspective.

My counsellor and I definitely experienced some friction in our relationship. I was not always ready to let go of certain beliefs, even though they were painful. I treated my problems as the river that flows around the rock. I never really tried to move the rock and create a different direction. I guess that was my personality change after trauma. It is hard to let go. However, I was open to her challenging me no matter how painful it was. I guess we negotiated my healing process. She never let me leave the session without making sure that I was ok. Sometimes, I thought I was reaching my breaking point. I felt panic and hysteria over the questions she would ask me. In all honesty, I don't know how she did it, and how she pushed me to face what happened. By the end of each session, I was spent, I was tired, and maybe a little angry. But I always came back. This was change-provoking and she explained that this would happen. I knew it was coming, and it felt quite normal to go through it.

My counsellor put things in perspective for me, which actually helped me a lot. I had these epiphanies, and I experienced depression and anxiety. My counsellor validated these, and taught me that it was normal to feel this way. She also gave me hope, and facilitated my self-discovery. It was difficult but I reclaimed myself in the end. I don't remember that she ever did anything to compromise our therapeutic relationship.

I always knew that our therapeutic relationship would end. I remember feeling devastated when my counsellor told me that this would happen. However, she always left it open for me. I knew I could go back if I needed to. I felt alone many times in my life, and I thought I was worthless. Seeing my counsellor deconstructed those feelings. She made therapy quite comfortable for me. I mean in Croatia you only saw a counsellor if you were crazy or mentally ill. And at times, I did feel like I was going crazy and losing my mind. However, my counsellor taught me that the more open I am about talking, the more people that have gone

through the same thing I would find. When I arrived in Canada and attended counselling, I learned that you don't have to be crazy to seek help. The stigma around counselling was demystified for me.

After my counselling journey, I have to say it is important to do your homework about why people seek therapy. Any time you feel stuck, or you are unproductive, I think you should go for therapy. But for therapy to work, you have to find a right counsellor. If you are able to do that, you will find that therapy has value. I do believe that language sometimes presents an obstacle. Not just English but language in general. Therapists need to reach out to people in the language people understand. They also have to pay attention to whether clients are engaged in a therapeutic process. If therapists use appropriate language, the connections will be made. My counsellor recognized that I belong to a different culture, and that alone created the trust between us. She often compared my culture to Canadian culture. It helped me understand how things were different and how they were similar. When she did that, I felt understood.

The most important thing about my counsellor was that she did not come with predetermined set of values, and she did not impose her worldview on me. She tried to meet me in the middle, and explore my beliefs. She then worked from there to help me create changes I wanted. She actually tried to understand me. She was professional about it, and that facilitated my commitment to getting better. I viewed my counsellor as someone who knew what she was doing. Her experience increased my confidence in the counselling process. In fact, her experience created a direction and acceptance. Finally, I was not viewed as a freak but as an ordinary person. If I had not talked to her, I would have never been able to talk about what has happened to me today.

I remember thinking how my life would have been different if I did not come to Canada. Back home, your experiences are kept private. It was embarrassing to talk about the sexual assault. Yet, I knew deep down inside that this terrible thing happened to me and I have to get rid of it. I finally did when I came to Canada. Counselling validated what happened.

When I think what counsellors need to do to better address refugees' concerns, I would say they have to step outside of their Western beliefs. One therapeutic approach will not fit all people. Counsellors should suspend their preconceived notions of what refugees need, and understand the complexity of refugees' emotional experiences. I would encourage counsellors to do more research about their own culture to figure out what they should and should not do in therapy with refugees. The most important thing is to meet clients where they are, and then work with clients to find out what kind of therapy would work the best.

Refugees are already portrayed as poor and dirty individuals that come to Canada and need to be fixed. Nobody ever considers that they might have been doctors, engineers, or professionals in their countries. I think that it is important for counsellors to expand their theoretical knowledge, and strengthen their professional stance. Obtaining right education and skills is the first step. Being open-minded and culturally sensitive is also important. Counsellors may not be comfortable listening to things that do not align with their values, but they have to be prepared to hear them. Suspending prejudices and stereotypes is a difficult job but it has to be done.

Many refugees tell their stories first time in counselling. If counsellors cannot deal with that, they should not get involved because they could actually damage their clients, and prolong their healing. They need to be ready to welcome whatever experience comes through their door. Refugees already have a label that works against them everywhere. Just because someone is a

refugee does not mean he/she should not be treated with respect. Understanding refugees' experiences opens up the therapeutic process, and helps people find new lives easier.

Lolita: The Art of Survival

I always thought that my life experiences and all of the hardships I endured along the way did not require me to go to counselling. Instead, I believed I was strong enough to fight with them on my own and occasionally seek support of a good friend or a certain person who is close to me enough to be privileged to listen to my problems. Thus, when I went to counselling the first time, I was really just experimenting and wanting to see how I would feel talking about my issues to someone who did not know me. Second time I went to counselling; however, was inevitable and necessary. I must admit I was taken aback by the experience I had. Although I did not expect it, my counsellor comforted me in the most generous and possible way she could. Almost instantly, I felt I could tell her anything that was worrying me, or that I perceived to be a problem in my life. Sometimes I was puzzled by this closeness I felt to her. I mean I had friends in my life that listened to my troubles and worries. However, they have never understood the magnitude of my pain like my counsellor did. I guess I realized that talking to a counsellor put my troubles and worries in a different perspective and gave them a different meaning. I think what help that process immensely was the fact that my counsellor did not know me and by default she could be more objective in her appraisal of who I am as a person. Such approach helped me realize that acknowledging my problems and admitting that I need help is healthy and realistic way of creating change in my life. It also helped me understand the behaviour of other people around me and how they respond to me. Most of all, I appreciated the reassurance and strength that my counsellor gave me to move forward in a new way and try to work through my issues rather than toss them aside.

I often compare my two different experiences of counselling. The first time I went was purely experimental. I was still in college and I often wondered how would it look like to be in therapy even for one session. So I did exactly that. I attended one session. I did not know what to expect of it. I felt a bit isolated and somewhat upset with the college counsellor. Somehow, it seemed to me that all he was doing was profiling my character. Nevertheless, in 30-40 minutes, I managed to tell him a short version of my story, my past life, my family, my life perspective, my habits, and few other details. He was then able to determine from my short synopsis that I was a war child and that I was suffering from Post-Traumatic Stress Syndrome among other things. Although he was not far off in his *diagnosis* of me, I did not pay it too much attention and I never returned to see him again.

My abstinence from counselling did not last very long. I returned to counselling soon after I was involved in a car accident that resulted in a pretty serious concussion. I was ordered to attend counselling because my doctor was concerned about the possible brain damage and loss of communication between the brain hemispheres. I figured that it would not hurt to try counselling again because I was struggling with impaired concentration, dyslexia, and minor short-term memory loss. I was also having flashbacks and struggling emotionally. I concluded that my injury triggered depression, supressed feelings from war trauma, unresolved cultural issues, and my inability to overcome even the smallest problems. It seemed that after everything that has happened to me, counselling could not possibly cause me any more damage so I decided to go and try it again.

The first time I went for a session, I sat down with one of the most prominent counsellors in town. Although he was prominent, I did not like his approach. He was not a very warm individual. He seemed a bit cold and when I asked him what I needed to do, he replied that I

could talk if I would like and that if I am not comfortable with him, he would gladly turn over my case to one of his associates. Then he proceeded to compliment me on my looks. I really did not like that. I immediately became apprehensive and indeed I asked him to transfer my case to another counsellor. That was the best possible decision I made in a very long time. From the very first time the new counsellor greeted me, I sensed her warmness, good energy, and positive attitude. I am not sure how this reflects in psychology, but due to my intuitive nature I felt really comfortable around her. Her office was very inviting and warm. She asked me about my current condition and what is bothering me. She also asked me about my feelings. Nobody ever asked me about my feelings before. I have no idea why, but immediately after I started talking to her and explaining my situation, I started crying as well. I shared with my counsellor what kind of feelings I was having, and why I was not able to talk to others about my problems or to cry openly in front of people. I mean I am a pretty private person, and yet I was able to open up and shed a few tears in front of my counsellor relatively quickly. I think what made it ok was that she normalized it for me. She told me it was ok to cry, and that with crying my stress was being released. Right there and then, I realized that even though I appeared tough in the eyes of others, deep down inside I was very fragile and sensitive individual. That really made me feel safe with my counsellor. I proceeded to attend seven sessions with her before my insurance ran out.

I often wondered whether my experience of counselling changed because I switched from a male to a female counsellor. I wondered if I had conformed to my counsellor because she was a woman. I mean I was not sure if gender had anything to do with that. In hindsight, I was always comfortable with my male friends, companions, and co-workers. In terms of working environment, I always preferred male co-workers. In the real life, growing up next to older brother and being very close to him conditioned me to relate to male friends easily. I guess over

time, I became *one of the boys*. However, I never really confided in boys. They were not trustworthy. I had only a handful of girlfriends but I confided in them more often and I was more open with them. So I guess thinking about this male-female counsellor thing, I think that initially it really did not matter all that much to me. But my subconscious was probably telling me that I should start with a female counsellor.

What made my counselling work for me was the easiness that came with my counsellor. The appeal and warmth that made me comfortable to open up and tell her about my problems. She was very adamant about listening and focusing all of her attention towards me. She also gave me numerous exercises and affirmations to help me stay on the right track between the sessions. That helped my healing process tremendously because I felt she was with me whenever I needed additional support and guidance. My counsellor never judged me. Her positive energy impressed me and sparked my curiosity so much that I just simply had to continue attending our sessions. I think the most important thing she did was that she made me feel safe. She asked questions and she did not interrupt me when I was talking. She recognized when I needed time to reflect, to talk, to share, and to be silent. I often interrupted her while she was trying to explain things to me and asked her questions related to my worries. She never had a problem with that. In fact, she welcomed my interruptions and acknowledged my questions as mini learning processes that were very important for my change.

I am not sure if I can pinpoint when my healing began. I felt a sense of relief when I cried in front of my counsellor during the very first session. Every other session after that was revealing something about me that I did not know, or about my past. That new knowledge and new understandings brought me extra peace. Of course affirmations and breathing exercises that I used daily were additional tools that over time became positive ways of coping with my

problems and worries. But none of this would have worked if my counsellor did not allow me to be emotional, sensitive, and tearful. Should I have not been able to do that, I would have never been able to reflect on my past and my problems. In many ways, her openness facilitated my movement forward. I guess that helped me a lot because I did not want to deal with my problems anymore alone. This time around, I gave myself time, I found the right counsellor, and that is when I realized that therapy was working for me.

My counsellor's office had a floor-to-ceiling window that looks outside into the park and the water fountain from which the water was flowing into a man-made little stone stream. Whenever my counsellor was making me do relaxation exercises in front of her, in order to calm and open myself up, she would instruct me to turn my chair toward that window and look out as I was breathing slowly in order to help me relax and heal better and faster. Even now when I get stressed out, I close my eyes and think of her window and it brings me the same sense of peace. Another thing that really made me comfortable was that my counsellor always greeted me with a smile. Her attitude was always positive, whenever I walked into her office. She always had answers for each and every one of my questions with regards to therapy and topics that we were discussing. Her knowledge and experience were uncanny.

My counsellor helped me feel validated because she was paying attention to every word that I was saying. That was important to me. Every segment about every issue that I was telling her, she took with a great consideration and broke it down to every detail in order to help me understand the situation and the issues I was struggling with as a whole. Looking at the *big picture* instead only at its parts eventually led to my healing. When I first started therapy, I really did not know what to expect from it. I had this pre-conceived notion that counsellors (after listening to their patients), tell the patients the same thing in a different way. In my mind,

counsellors were just stealing the patient's words and putting a scientific twist on them. Pretty quickly I realized that I was learning a lot from my counsellor and that my assumptions were not correct. For example, the exercises of diaphragmatic breathing and understanding myself have helped me tremendously in my everyday life. They helped me approach my problems and issues in a different way and look at them through a different lens. Applying those various approaches affected me in the most positive way.

I initially started therapy for issues unrelated to my refugee status. However, my past trauma and war issues came up quickly in my conversations with my counsellor. I knew then that those issues are deeply rooted and would become a focus of my counselling sessions. I mean I have lived in Canada for almost 16 years and I thought that I have dealt with most of my past until war sneaked up on me again in counselling.

Counselling was not widely accepted in my country. It was only considered a viable option for those who were deemed mentally ill or unstable, or for those who had problems with drugs. Nevertheless, when I started counselling, I did not find it personally culturally shocking. Unconsciously, I knew that my war trauma has not disappeared and that eventually I will be in counselling for a long time. When I was in college, I learned that counselling should be only considered when one feels ready. I mean, now I know that counselling is not such a big taboo in my country and it definitely is not a taboo in Canada. Here people seek help frequently when they struggle with emotional instability or emotional problems. So I know that regardless of where I am, I would go to counselling because I needed help.

At the beginning of my journey, I was somewhat uneasy with counselling because I did not know what to expect. I thought that therapy is expensive and unless it is covered through insurance, it was not accessible to me. Furthermore, it seemed to me that counselling is a never-

ending journey, and that every little thing is examined for no reason at all. I believed that even though I admitted to myself that I had many unresolved issues, I could deal with them without professional help. For a long time, I thought that talking to a friend or someone really close to me would be enough.

When I reflect on my journey, I can say that I did not have any issues with my counsellor, and my counsellor did not do anything in particular that I would disagree with. I respected my counsellor simply for being a knowledgeable individual who helped me overcome my troubles. I felt very comfortable, and there was no room for anything to disagree on. In terms of cultural clash, I think that I have lived in Canada long enough to not be affected as much. I went to high school and college here, and I adapted to the new life easily. However, my roots and my background were still noticeable, and they played a big role in my life. That is something that my counsellor acknowledged during our first session. I felt I was understood when we discussed the topics of family, and connection I had with my parents. My counsellor even emphasized that due to my cultural background, my ties to my family were stronger than her ties to her family. She even stated that she believed that close relationships that I had with others played an imperative role in releasing my feelings and overcoming my struggles.

The top three things that I took away from counselling were relaxation/breathing exercises, paying attention to details and *the talk* in general, and engaging in discussion at my own pace to process information that I was receiving from her. When I was in college, I asked one of my professors who was also a psychologist, what do I need to know about the therapist when choosing one, and she told me to choose a therapist who could understand me, empathize with me, and who has a similar experience to mine. At the very least, I was told, I should find someone who has worked with people who had similar issues to mine. I do truly believe that

counsellors can work effectively with refugees even when they do not have the same refugee experiences. However, they have to have some knowledge about refugee status. I remember telling my counsellor that she should have a refugee friend to learn more about refugees in general. I think that the stepping stone is obtaining knowledge about refugees in general, their issues, and their status. This could help counsellors tremendously to empathize with their clients in therapy. I most certainly found a counsellor who was willing to listen, and be there for me. In the end, my experience of therapy was quite rewarding and helpful. Today, I feel better and I think that I am on my way to becoming a well-rounded individual.

Nera: The Art of Winning

I came to Canada 17 years ago as a government sponsored refugee. I was only 20 years old, alone, and completely lost. I left my war-torn country behind along with my family and friends in hope that I will find a better life elsewhere, and eventually sponsor my parents and siblings. My goal was to reunite with my family in a new country where our lives would not be in danger, and where we can live the lives that we deserve to live. When I arrived, I was shocked at how difficult it was to begin a new life alone. I barely spoke English, and I did not know anybody. I had nightmares, and most nights I slept in my closet because I was too afraid. I knew that I was troubled. I just did not know what to do about it. I thought that enrolling in ESL classes would be helpful for me, so I did that. However, strange classrooms, strange people, and the novelty of everything bothered me.

One day in class, I began crying for no reason. I guess I was triggered by something but I did not know what. It was then that my ESL teacher suggested that I see a counsellor. Initially, I was terrified of it, and I refused, stating that I am fine and that I do not need any help. However, I took the brochure she gave me, and promised I would at least think about it. As my problems

were becoming bigger and more difficult to handle, I finally decided to call the counselling agency and make an appointment.

My initial experience of counselling was strange. I remember feeling ashamed for needing help, and I was worried that I would embarrass my family. If they knew that I decided to go to therapy, they would disown me. That is something that crazy people do back home.

And I knew I was not crazy. I also knew that I needed support and a place where I can talk about my issues. I walked into a counselling agency pledging to myself that counselling will forever be my secret, and I made a promise then to never tell anyone about it. And then I met my counsellor.

My counsellor was a middle-aged lady. I remember her as warm and welcoming. She picked up on my fear and reassured me right there and then that my story is confidential and that no one would ever find out about it. That made me feel really comfortable and happy. I was grateful to know that there was one person in this world who was willing to respect my wishes. As I began the process of unraveling my struggles, I quickly learned that it was helpful to talk to another human being. Of course initially, I was apprehensive, and I did not want to disclose all of my traumas to my counsellor. I was being secretive and withdrawn. However, she did not have a problem with that. She respected my pace and allowed me the time I needed to fully tell my story. When I needed to talk, she listened. When I needed silence, she was silent with me. When I needed support, she supported me. That was really rewarding for me.

As my therapy progressed, I became more and more comfortable with my counsellor. We have developed a trusting relationship, and I did not doubt the process anymore. Most of all, I appreciated that she did not judge me. She never judged me. She learned about me just the same as I learned about her. Even when she appeared puzzled by my words, she asked for

clarification. She often referred to me as her cultural mentor. That made me feel really important and I felt that I mattered. She also maintained confidentiality, which was essential to me. After all, this was a private journey for me, and I needed to know that it would stay private as long as I needed it.

I attended counselling once a week for 6 months. I never missed a session. Most weeks, I looked forward to it. I felt that I had a special relationship with my counsellor. I knew that she was not my friend because we were in a professional relationship. However, at times, it felt that she was all I had. She was that one person I could tell all of my secrets to. Most of all, she valued me as a woman and as a person. She understood my values and views about life, problems, and difficulty adapting to the new life in Canada. The most valuable lesson I learned from her was that even though I belong to a different culture, I am a person like anybody else. She taught me how to embrace the freedom that women in Canada enjoyed. Initially, that was a hard concept for me to grasp but eventually I became comfortable with it. It was nice to know that I could embrace my womanhood without fear of being judged or punished. As time passed, and as I disclosed my story more, I started feeling better. I noticed I was doing better overall, and I began setting goals for myself. One of those goals was to go back to university and get my degree, and I actively engaged in that process. To this day, I think that I would not have done that if it were not for my counsellor and counselling in general.

Although my counsellor understood me most of the time, there were moments when I left my sessions wondering if she truly knows what I am going through. What was very positive was the opportunity to come back and talk to her about that. Whenever I raised an issue in counselling, she listened, apologized for misunderstanding me, and invited me to tell my story again. At those times, I felt most respected as a human being. I felt that she did not view me as

a refugee or as an immigrant. She viewed me as a person. I also liked how accessible she was always. Even when I needed to touch base with her over the phone, she was always available. It is such a gift to know that someone like that existed, especially when I was working through the most difficult issues of my life.

I think over time, I stopped paying attention to cultural differences between my counsellor and I. We have found a place of mutual regard for each other, and we exchanged our experiences. She taught me how to navigate the Canadian culture effectively, and I, in turn, shared the most important parts of my culture with her. I think we came together through this counselling process to understand each other as unique human beings.

When I think about what was the most inspirational part of my counselling, I would have to say that it was the storytelling. I grew up in a culture where storytelling was regarded as very important. Through it people educated people, and that is how culture continued existing. Being able to tell my story in the way that it was never told before allowed me to find new meaning in my life. I realized that I was no longer a victim of what has happened to me. Instead, I began seeing myself as a winner. When one asks me what does it mean to be a winner, I would say it means to be a winner in life, a creator of one's own world, and a craftsman of one's own destiny. Through storytelling, and having someone to listen and participate in the process gave me my life back. In some way, I became a new person, a person that I liked and admired. What more can a person ask for?

One of the things that my counsellor did that facilitated my healing process was introduce me to journaling. She noticed that at times, I struggled with saying what I needed to say. During one of our sessions, she pulled out a journal and gave it to me. She told me that I could use it as a *book of me*. That really resonated with me because I never considered writing anything about

me on the paper. When I came home that day, I began writing and I wrote for hours. I wrote about everything and anything, and I noticed that my heart was not in pain as much anymore. I guess finding ways of how to express my feelings openly and let my emotions guide me was really helpful in the process. If my counsellor had not introduced me to it, I probably would not have done it on my own. She was my guide when I could not find my way.

I would definitely recommend counselling to all refugees who need it. Even though I was apprehensive about it initially, I quickly learned that it could be very helpful and eye opening. In the process, I had to challenge some of my own taboos about counselling. I had to convince myself that I am not crazy and that going to counselling was as normal as showering in the morning. Once I was able to demystify the process, I really began growing in a different way. Many refugees come to Canada and never consider talking about their issues. I often wonder how many endure a lifetime of hardship as a result. I also think what would have happened to me if my teacher did not give me that brochure and encouraged me to go. I am almost certain that I would have been in a hospital for mentally ill people.

When I meet other refugees, I am quite outspoken about my counselling experience. I tell them a story of healing and a story of winning. I see that as my own little information session. After all, if it was helpful for me, there is no reason why it would not be helpful for others. I also tell people that nothing extraordinary or strange happens in the counselling room. It is just two people who engage in conversation. In my eyes, therapy is just another talk with a different purpose. I wish that everyone who is new to Canada knows that therapy is available, and that talking about your issues in a private and safe environment is life changing in itself. Human beings never consider the importance of trust, privacy, and safety, until those become a

luxury. We all take things for granted. However, when we lose them, we truly begin appreciating what we have lost.

The top three things that I took away from counselling were safety, respect, and absence of judgment. That is what my counsellor gave me. I felt really safe in her office. I felt respected. I never felt judged. When you look closely at those things, you can truly appreciate their meaning. To be able to open up emotionally and make yourself vulnerable in front of a complete stranger is a skill. It is also a courageous act. It is not what we see in movies. It is a real deal. To learn from therapy, you have to choose the right counsellor, you have to feel understood, and you have to be motivated to change. I don't remember any specific therapeutic techniques that my counsellor has used other than journaling. But what I remember is that I was heard. My voice did not echo in an empty space. My voice was acknowledged fully.

I believe that one of the most difficult things for a refugee is to adapt to the Western way of living. I think that is the main reason why people experience struggles when they immigrate to new countries. If they are not understood and if their journeys are not viewed as serious and important, refugees do not do well. Having said that, I would like to invite all counsellors to be culturally open to people who come to Canada from other parts of the worlds. It is important to learn about people's journeys and not assume things based on some stereotype. All refugees are people. They are unique but they are also similar to others. Counsellors should learn about different cultures, be open to accept different values, and be prepared to listen. I think that all people connect through conversation, so if counsellors create a conversational environment, everyone engaged in the counselling process profits. Would I go back to counselling if I had to? In a heartbeat. I would call my counsellor and book a session. In the meantime, I believe in

myself, and I continue to journal my life. Learning to tell my story was the greatest gift of therapy, and if that was the only thing I got, it was enough.

CHAPTER FIVE: DESCRIPTION OF FINDINGS

At the beginning of my journey, I undertook the exploration of refugees' experiences of counselling. I began with exploring my own experience of being a refugee in counselling. Subsequently, I explored the experience of six co-researchers who shared their story. The narratives of our experiences were integrated into a creative synthesis, as a representative of this collaborative endeavour. In Chapter 5, I discuss the thematic analysis, and four core categories that emerged from co-researchers' interviews. I offer a detailed description of sub-categories and themes. I also present a composite depiction of refugees' experiences of counselling. I conclude with a creative synthesis in a form of a story that captures our collaborative understanding of the meaning of refugees' experiences of counselling. Examples of co-researchers' quotes are offered throughout the Chapter 5 to highlight categories, subcategories, and themes.

Thematic Analysis

The final thematic analysis yielded 38 themes, which when categorized together produce a unique counselling process model for refugees. Please note that the unique counselling process refers to the integration of co-researchers' individual counselling experiences. Co-researchers' experiences of counselling were marked by change and transformation through a complex therapeutic process and genuine human encounter. The process of counselling required the co-researchers' willingness to navigate a challenging initial encounter with therapy, complex counsellor factors, and unique therapeutic relationship. The core four categories that resulted from this heuristic inquiry were as follows: (a) counselling process, (b) counsellor factors, (c) therapeutic relationship, and (d) client outcomes. The subcategories and themes captured within

the above mentioned categories represent a detailed account of challenges and successes as coresearchers experienced them within the context of a therapeutic encounter (See Table 2).

Table 2

Categories and Sub-Categories

CATEGORIES	SUB-CATEGORIES
1. Counselling Process	Initial Counselling Contact Subsequent Counselling Experience
2. Counsellor Factors	Personal Characteristics Professional Competence
3. Therapeutic Relationship	Ethical Bond Core Therapeutic Factors Cultural Influences
4. Client Outcomes	Emotional Catharsis New Meaning Personal Change

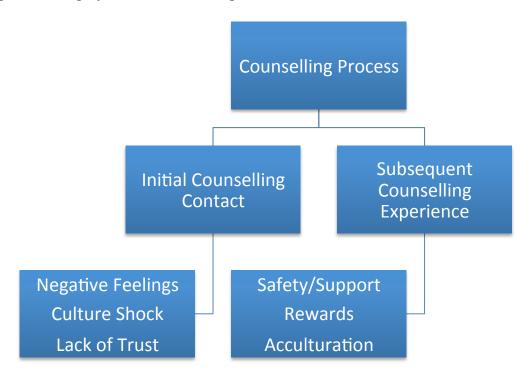
Category One: The Counselling Process

In their efforts to consolidate the pre-migration struggles with the acculturation challenges of adapting to the new life in Canada, co-researchers sought and subsequently accessed available counselling resources. Throughout the interviews, it was evident that the decision to engage in the counselling process was characterized by mixed feelings related to the initial contact with the counsellor, negotiation of pre-existing knowledge of counselling, and subsequent experience of counselling. Co-researchers commented on the lack of counselling resources in their home countries and expressed their discontent with the negative perception of counselling within their cultures. Viewed from their plural cultural lens, the engagement in

therapy within their own cultural context would have situated them in the space where they would likely be viewed as weak, mentally ill, and/or mentally unstable individuals.

The language of unfamiliarity with the counselling process, as well as stigma attached to it, produced challenges for co-researchers. Consequently, co-researchers experienced strong emotional reactions as they re-examined their worldviews, values, and beliefs related to counselling. Strong emotional reactions led to a detailed deconstruction of the cultural knowledge used to understand the notions of psychological well-being and therapy. Co-researchers acknowledged that their scepticism about counselling impacted their initial view of the counselling process. However, the purposeful intent to stand up to the rigid personal worldviews resulted in the new experience of the counselling process, marked by the sense of belonging to the new culture, enhanced feeling of safety and support, and subsequent rewarding counselling experience. Figure 1 represents the counselling process as interpreted from the co-researchers' point of view.

Figure 1: Category 1 - The Counselling Process



Initial Counselling Contact

The initial contact with the counsellor lead to internal conflicts about seeking help. Coresearchers re-negotiated their own boundaries and challenged stereotypes they held about counselling. For the majority of co-researchers, the decision to seek counselling clashed with their personal, family, and cultural values. This challenge to reconcile the dissonance between their cultural values and freedom to engage in decision-making process left the co-researchers with strong negative reactions towards counselling.

Negative feelings. For co-researchers, the idea of seeking counselling help was directly in opposition to what would culturally be expected from them in their countries. As a result, they experienced fear, guilt, and shame, which further strengthened their hesitation to engage fully in therapy.

My initial experience of counselling was strange. I remember feeling ashamed for needing help, and I was worried that I would embarrass my family. If they knew that I decided to go to therapy, they would disown me. That is something that crazy people do back home. (Nera, age 37)

Additionally, the fear related to the counsellor possibly misunderstanding their cultural background and refugee experiences further intensified co-researchers' scepticism about therapy in general.

I was hesitant at the beginning [of counselling] because again it's not really part of my culture and my family is really uptight and closed, and we don't even talk about our issues and problems. I was very hesitant and it was weird to talk to the stranger about my issues. It was very challenging, you didn't know how it was going to turn out because that was not something we generally don't do in Yemen. (Lamija, age 41)

When I first started thinking about counselling, I was quite sceptical because I did not know what to expect. I worried that the counsellor would not understand my cultural background. In other words, I was not sure if he/she would be able to see him/herself in my shoes. I was not sure if he/she should even understand what it was like for a newcomer to come here as a refugee. (Andrea, age 26)

Initially, I was sceptical about counselling. I was not sure what kind of help I was going to get and whether it would be worth it in the end. I used many excuses of why I should not go to counselling and even said to myself that I am too busy for therapy. I think at that time, any kind of consultation or initiating counselling was too challenging for me. However, I knew that I was making too many excuses because I was afraid of how difficult it would be to talk about things that I experienced. I was used to burying my problems deep inside of me and not think about it. (Fatima, age 37)

For some co-researchers, the decision to seek counselling was also born out of loneliness, isolation, and/or a persistent need to address the psychological struggles they were experiencing. Most co-researchers indicated that someone else (i.e., a friend and/or immigration professional) suggested counselling resources for them. Additionally, co-researchers considered accessing counselling support as a last resort after the previous attempts to resolve their issues on their own have failed

I found out about the counselling through the Immigration Society. My decision to access it was born out of loneliness. When I arrived in Calgary, I did not know anybody. I struggled with finding my place here [in Canada], and I thought that perhaps listening to the advice to seek counselling is the best option for me at the time. I needed some guidance and support from whoever could offer it. (Andrea, age 26)

I heard that counselling was available from a few colleagues at work. I also had friends from back home who attended counselling. They told me it was really helpful for them. At the time, I felt that I really needed someone to listen to me. Someone who was not directly involved in my situation. It seemed like a good idea to have an outsider hear me out and guide me in overcoming my problems. (Fatima, age 37)

Culture shock. For co-researchers, immigration to Canada represented a challenging process of resettlement and acculturation. Their experience of culture shock was related to their journey of immigration and their reluctance to access unfamiliar support services. For many, lack of prior experience with counselling represented a challenge.

When I arrived, I was shocked at how difficult it was to begin a new life alone. I barely spoke English, and I did not know anybody. I had nightmares, and most nights I slept in my closet because I was too afraid. I knew that I was troubled; I just didn't know what to do about it. I thought that going to ESL classes would help, so I did that. However, strange classrooms, strange people, and the novelty of everything bothered me. One day in class, I began crying for no reason. My ESL teacher suggested that I go see a

counsellor. Initially, I was terrified of it, and I refused, stating that I am fine and that I don't need any help. There was no way I was going to do that and talk to someone I have never seen in my life. That was too much and all I wanted in that moment is to go back home where none of these strange things existed. (Nera, age 37)

In this case, the co-researcher perceived the available counselling help as too overwhelming. It is possible that the co-researcher reacted negatively to the teacher's advice because she was experiencing competing demands related to the resettlement process. When refugees were faced with pressures *to fit in*, they often seemed prone to more social isolation and failure to seek counselling when necessary. It seemed less stressful to deny help than to explore the counselling options further. Co-researchers' pre-existing ideas about counselling and the role of a counsellor further deepened their experience of culture shock. The expectations of where counselling should take place, how counsellors should dress, and what topics should be discussed in therapy influenced co-researchers' perceptions.

My first contact with counselling was in Canada. I did not find any value from it in terms of dealing with trauma that I had. I was sexually assaulted in Croatia and I found a counsellor here in Canada that didn't inspire a change in me. I mean, in my country psychologists were in suits, very professional, and very guarded. In Canada, counsellors were different. When I met my counsellor here, she was in a long flowing skirt, her hair parted in the middle, and she looked like a hippie. I did talk to her, but I think she did not do a very good job as a counsellor. She listened, and she occasionally giggled. That was not the help I was looking for. (Milijana, age 40)

Co-researchers described difficulties related to negotiation of deeply rooted cultural stereotypes and efforts to fully engage in counselling. Two out of six co-researchers experienced their initial counselling as a negative and traumatic event. This was partially based on the mismatch between them and a counsellor. It was also based on the personal and societal norms that were guiding co-researchers' understanding of counselling. One should note that refugees' expectations about the counsellors' professionalism and expertise are often based on personal cultural understandings of how counsellors should look like. As a result, refugees' initial

interpretation of counsellors' appearance and mannerisms directly influences their perception of counselling and subsequent outcomes.

Engagement in counselling represented a journey of personal transformation. This necessitated a significant shift in co-researchers' interpretations of therapy, motivation to engage in and remain in counselling, and willingness to be open to novel situations. The beginning of counselling resembled an experiment in which co-researches had an opportunity to test the hypotheses they formulated about what it would be like to be in therapy. According to one co-researcher, "When I went to counselling the first time, I was just really experimenting and wanting to see how I would feel talking about my issues to someone who did not know me" (Lolita, age 29).

In creating a new context within which they could resolve their issues, refugee clients continuously revisit their personal, historical, and cultural understandings of counselling. For the majority of co-researchers, the willingness and openness to identify, externalize, and subsequently address their struggles within the new context was necessary and preferred.

Lack of trust. Co-researchers' first memory of counselling was impacted by their lack of trust in the counsellor they were going to see. The perceived pressure to seek help from someone else challenged co-researchers' worldviews about their own ability to effectively deal with their issues. Refugees arrive in Canada from diverse life experiences. Their lives are characterized by views and beliefs that are often in direct opposition of what is expected of them during resettlement and adaptation. At times, many refugees perceive the new culture as hostile and inflexible without recognizing their own inflexibility to change. This also relates to refugees' counselling experiences during which the counsellors' intentions are interpreted as interfering with refugees' mindset and the counsellors were viewed as hostile. One should keep in mind

that refugees often seek counselling secretly and do not wish their families and friends to know about it. In this study, co-researchers referred to the term *shielding one's honour* as the attempt to affirm a deeply ingrained cultural belief that one should deal with personal issues privately. Co-researchers' inherent responsibility to shield their honour by negating the external help and continuously attempting to *snap out* of their troubles represented their protest to what they perceived as the new cultural context imposed on them. One should note though that the co-researchers' pre-, trans-, and post-migration experiences possibly contributed to their lack of trust in counsellors and added to the perceived inequality in the counselling setting.

Every once in a while the bad memories would haunt me, and I was tired of running from them. I wanted to be free of them and going to counselling was an only option. I was scared though – scared of the counsellor. Who is this person? Will this person keep my secrets to himself? What if someone finds out about this? I was also scared of opening up, reliving my traumas, and talking about my pain. So even now when I reflect on that, I feel the heaviness of making a choice to go to counselling. (Fatima, age 37)

Challenging resettlement and acculturation experiences, loss of familiar support network, and social isolation contributed to refugee clients' lack of trust. One co-researcher shared,

In the beginning I did not trust anybody. I wasn't certain. I was questioning whether or not somebody from North America, like a White Canada person could even relate to me (Lamija, age 41)

The experience of being isolated and alone in an unpredictable environment significantly impacted co-researchers' openness to counselling. For co-researchers, a counsellor represented yet another individual who is not to be trusted. Another layer of nuance is added for co-researchers who questioned their counsellors' ethnic affiliation. The perception of counsellors' whiteness likely introduced the power imbalance in the counselling process and illuminated co-researchers' prejudice towards the counsellors who were perceived as culturally different. In fact, it appeared that the co-researchers' judgmental views related to counsellors' ethnicity

became interlinked with emerging working alliance and they directly contributed to coresearchers' initial lack of trust.

In the beginning I felt disconnected in her [the counsellor] confidence as in what she represented for me. Like very strong white North American female that you know...that's far away again from what I can see back home. So I think that was a challenge for me because I found her in the very beginning very intimidating. (Lamija, age 41)

There was no way I could trust her [the counsellor]. I just kept staring at her underarm and her long hair and...just her nodding and agreeing with everything I said. She didn't encourage me to explore it [trauma] further you know or didn't ask me questions...I just kept talking and talking and talking and I felt it didn't get anywhere. I knew I could not trust her with my well-being. (Milijana, age 40)

Co-researchers' willingness to try counselling impacted their readiness for change.

Although co-researchers struggled with opening themselves fully to their counsellors, they eventually engaged in a therapeutic process and began their counselling work.

The Subsequent Counselling Experience

The co-researchers' ability to shift their perceptions of counselling and their counsellors, and begin viewing the therapy as a constructive process that was promoting change, created an atmosphere within which co-researchers felt they could acculturate successfully. The experience of heightened safety and support, along with subsequent rewards from counselling, helped co-researchers in shaping their view of counselling as a preferred process.

Safety/Support. For the counselling process to evolve into a meaningful journey, coresearchers needed to perceive the counselling environment as safe and supportive. The counsellors' willingness to reinforce the welfare of their clients and collaboratively build an atmosphere of comfort contributed to co-researchers' perceptions of safety. Additionally, the counsellors' professionalism and their dedication to protect their clients' privacy and confidentiality strengthened the counselling process.

As the time progressed, I kind of gained a trust in the counsellor. I knew it was confidential what I told her. She was assuring me that everything was confidential. You also sign forms when you come in, so it gives you some kind of assurance that what goes between you and the counsellor is private and it won't go out. I could open up...after opening up to a complete stranger I realized it's not as bad as I had it in my head. (Fatima, age 37)

It was important for me to feel calm, secure, and safe in order to be able to disclose my struggles and problems. I think that my counsellor's patience played a major role in how I viewed therapy...I think that most of all, I truly appreciated that counselling was confidential. (Andrea, age 26)

Co-researchers disclosed their desire to trust another human being again. They perceived their inability to trust another person as an obstacle in re-creating their lives. Thus, the option of feeling *stuck in their issues* was no longer preferred, and they engaged in a conscious challenging of personal scripts that were no longer functional. This process included evaluation of the counselling environment and incorporation of perceived safety and support.

I never stopped wanting to make things better for myself. I knew I was just surviving and not living, and I wanted to feel alive again. I wanted to trust again. There had to be some trust in a counsellor there. I am telling someone about the damaged parts of me. And I felt this person [the counsellor] was someone who might be able to do something for me. She assured me with her questions, and it appeared that she was really listening to me. She was not just sitting there and nodding her head. I felt safe with her. She did not push me and [she] let me explore my experiences at my own pace. (Milijana, age 40)

I think what made it ok was that she [the counsellor] normalized it for me. She told me it was ok to cry, and that with crying my stress was being released. Right there and then, I realized that even though I appeared tough in the eyes of others, deep down inside I was very fragile and sensitive individual. That really made me feel safe with my counsellor. The fact that she invited my fragility to come forward. (Lolita, age 29)

It was important for co-researchers to feel understood and accepted by their counsellors.

As co-researchers' understanding of counselling changed, they became more open to receiving numerous counselling rewards that subsequently strengthened their openness to therapy.

However, it is important to note that the co-researchers responded favourably to counselling only when their counsellors fit the co-researchers' cultural scripts. It is possible that co-researchers

connected to counsellors who were readily prepared to modify their cultural views. This brings forward the question of co-researchers' willingness and/or resistance to adapt to new cultural learning.

Rewards. Co-researchers described counselling rewards as the amalgamation of collaborative counselling goals, relief from psychological pain, and creation of better coping strategies. Together, these factors influenced the co-researchers' overall perception of counselling and resulted in a unique story-telling experience that all co-researchers unanimously reflected on as the most positive aspect of counselling rewards.

Somewhere half way through when I decided to continue with the therapy and...I just felt better. At one point I was looking forward to those sessions...somewhere throughout that process...I realized I'm really benefitting. That she's [the counsellor] a professional. That she can relate to me in a special way. It was just good talking about it [the struggle]. I never shared those stories with anyone. It was just good getting it out there. (Lamija, age 41)

I guess it was different because counselling is just not really...it's just about letting you talk. Therapy is about actually getting you to see where you're thinking wrong and you know I had a lot of beliefs about my sexual assault that the counselling did not change at all. I felt like it was my fault...I felt dirty, I felt like used goods or damaged goods and I felt like no one could ever love me the way I was. And this therapist actually challenged those beliefs. She helped me to see that maybe it wasn't my fault. (Milijana, age 40)

As seen in the abovementioned examples, all co-researchers developed unique counselling goals. Regardless of their presenting concerns, all co-researchers noted that they benefited from having an opportunity to tell their story at their own pace within a context that was welcoming and accepting. Consequently, the decision to follow through with the counselling represented an important factor in their overall acculturation process.

Acculturation. All co-researchers commented on counselling as an important catalyst for their acculturation process. Going to counselling created a new view of help-seeking behaviours and resulted in a shift towards positive and meaningful adjustment to the new life in

the new environment. For co-researchers, going to counselling represented a form of integration in the new culture.

I never dreamed that Canada would offer such great services to me, and that my whole mentality with regards to therapy would change. I know now that I am not alone, and that there is help available to me should I ever struggle again. It definitely changed my way of thinking about what kind of help a person may need in their lifetime. (Andrea, age 26)

This co-researcher further elaborated on how going to counselling changed her overall perception of choices that she had as a result of immigrating to Canada. She noted,

I think in Canada we have certain freedoms that we did not have in Romania. I would have never been able to express myself fully in Romania...Here, on the other hand, psychological issues are seen as important. No matter what the problem is, the help is always available. That was a huge difference for me, to see that counselling and therapy are appreciated in Canada. There is no stigma here, and that is perhaps the result of a more modern thinking.

The opportunity of not being viewed as *crazy* individuals allowed the co-researchers to actually seek the help they needed. The mere fact that counselling in Canada is viewed as something that is readily available to everyone who presents with mental health concerns demystified the entire process for co-researchers and allowed them to imagine their life in a more favourable light.

The funny thing is, I became a big supporter of counselling. In Bosnia, I would not have dared to go to counselling. I would be afraid of being seen as crazy person. People back home would for sure judge me if they knew I went to therapy. I would have never put myself in that situation. In Canada things are different and counselling is not viewed negatively...Canada gave me lots of opportunities for a better life so you know counselling kind of opened my eyes. And to look back and see it in a positive way...not just like trying to cope and deal with the issues because there's more to life than I went through. That really helped me deal with life and future. (Fatima, age 37)

I thought I would give it [the counselling] a try because I'm in a new country and a different culture and I would like to assimilate and maybe that would help me assimilate into the culture...so once I tried it I decided to continue and the more I continued and the more hours I would spend with my counsellor, the more it really helped me. And that's really the reason I continued with therapy...I think at the end the Canadian society will

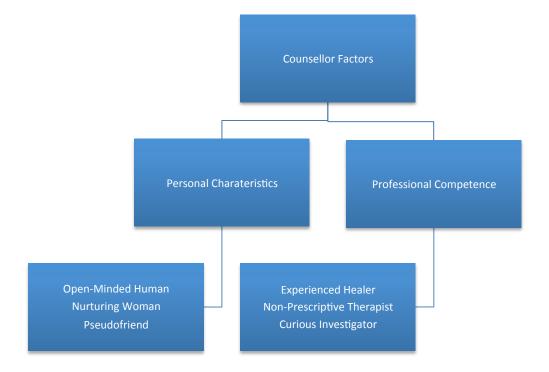
benefit from me being a healthier refugee and assimilating to society and this culture better and for me the counselling really did that. (Lamija, age 41)

Positive experiences of counselling was facilitated by specific counsellor factors. Identifying these factors allowed the co-researchers to further engage in a collaborative counselling exchange and challenge their personal boundaries in an effort to resolve their struggles.

Category Two: Counsellor Factors

For refugee clients, the nature of the counselling process greatly depended on several counsellor factors. Most co-researchers acknowledged that their counsellors' personal characteristics, as well as their professional competence, created a counselling atmosphere within which the change was viewed as possible. Although professional competence remained an essential factor in creating a safe and supportive counselling environment, counsellors' personality characteristics and their openness to present themselves as ordinary individuals significantly impacted co-researchers' counselling journey. Perceptions of counsellors' openmindedness, nurturing attitude, and friendly approach helped to de-pathologize the counselling process and fostered acceptance.

Figure 2: Category 2 – Counsellor Factors



Personal Characteristics

Counsellors' personal attributes made a significant difference in how co-researchers interpreted the therapeutic process. Counsellors' personal genuineness within the boundaries of a therapeutic encounter allowed the co-researchers to reach into depths of themselves and explore the meaning of their issues, needed change, and personal transformation. Counsellors' gender played a significant role in co-researchers' therapeutic journey. Since all co-researchers were women, for many the opportunity to work with a female counsellor brought on a new understanding of female solidarity on both local and global levels.

Open-minded human. Refugee clients engaged more readily in counselling when they perceived their counsellors to be open-minded individuals. Counsellors' ability to approach their clients as human beings and not focus solely on clients' cultural backgrounds facilitated clients' openness to therapy. All co-researchers in this study appreciated their counsellors' impartiality,

and celebrated the fact that they were not viewed under the dominant culture's microscope, but were instead acknowledged as individuals.

It was important for me to know that my counsellor was willing to keep her mind open and understand my situation from my own point of view. It is difficult to engage in a situation where you are potentially going to be viewed through a different lens. I was lucky that my counsellor was not like that. She was totally open to listening to my experiences. She did not make any opinions about my religion, or the customs from back home that I believed were important. She was willing to learn about who I am as a person and to her I was not just another problem walking into her office. (Fatima, age 37)

My therapist reached me in a way that was helpful for me. She used the language I understood and she viewed me as a human being. But that was not all. She also presented herself as a human being in each of our sessions. She was open to my experience. She recognized that I was coming from a different place and she realized that I required a different therapeutic process. When I realized that she was not only teaching me about the Canadian culture but was also learning from me about my culture, I knew that she, too, was just another human being who I can relate to...I felt accepted. (Milijana, age 40)

Counsellors' personal disclosures about the meaning of culture and openness to learn from their clients created an atmosphere of mutual erudition. For co-researchers, the nature of counselling changed and their attitudes towards therapy softened when they realized that they played an important role in the counselling process. Interestingly, this only occurred when counsellors reduced the co-researchers' perception of power imbalance in the therapeutic relationship through openness to engage in cultural learning. This experience strengthened the co-researchers' engagement in a broader discourse about various systemic issues that were contributing to their struggles. The question, however, remains about how much of cultural learning the co-researchers truly experienced. In fact, one may wonder about what being treated as a human being really means. Although all co-researchers welcomed their counsellors' openness towards them, it is unclear how open they were towards their counsellors. It is possible

that the co-researchers' expected their counsellors to suspend their prejudice towards them, while at the same time they struggled with their own prejudicial attitudes.

Nurturing woman. All but one co-researcher reported that their counsellor was a female. The counsellors' gender, although unimportant at the beginning of counselling, became one of the catalysts for expressing particular opinions that were previously supressed and kept private. The majority of co-researchers reminisced about their experiences of being women in their countries, as well as the importance of female bonding. In the co-researchers' eyes, women have the ability to relate to each other on a global level and create new realities for themselves when united. When such bonding occurs within the counselling context, the outcome is generally one of mutual understanding and support.

Where I grew up and where I come from...Middle East...the females and males are very very separated...whether it's education or whether it's family or any type of socializing. Having a female counsellor helped me process my issues faster...I think she was more sensitive to my issues and had the capability to understand me more and relate to me as a female. (Lamija, age 41)

This co-researcher further elaborated that working with a female counsellor reminded her of the things she liked about her own culture. She noted,

In Yemen, girls and women get together and share their stories. About hardships and what they're going through and so there is a lot of female bonding. So that [the counselling] kind of reminded me of back home because that is exactly how we would share stories...like females would get together and just talk about life.

For this co-researcher, the counsellors' openness to acknowledge the importance of women sharing their stories and challenging oppressive discourses in culturally appropriate ways facilitated the story-telling experience. The co-researcher concluded, "In a way it [the counselling] mirrored what the culture did back home for me...it created a cultural meaning in terms of relating to another female."

Some co-researchers chose a female counsellor consciously because of the nature of their presenting concerns, while some intuitively gravitated towards finding a female counsellor. For most, choosing the female counsellor reduced the fear of confiding in the stranger. Discussing the problems with another woman created a friendly atmosphere where female solidarity took precedence over the discomfort related to sharing personal stories with complete strangers.

I went to counselling once a month for a full year. When I met my new counsellor, I was glad that she was not a Canadian. I was also glad that she was not Croatian. Most of all, I was glad that she was a woman. That in itself made me think that she could provide me with a different kind of reality. I trusted that she would know how men talk to women if she was coming from a male-dominant culture. I also hoped that she would understand where I was coming from. (Milijana, age 40)

I often wondered whether my experience of counselling changed because I switched from a male to a female counsellor. I wondered if I had conformed to my counsellor because she was a woman. I mean I was not sure if gender had anything to do with that...I guess I never really confided in boys. They were not trustworthy. I had only a handful of girlfriends but I confided in them more often and I was more open with them. So I guess thinking about this male-female counsellor thing, I think initially it really did not matter that much to me. But my subconscious was probably telling me that I should start with a female counsellor. (Lolita, age 29)

Co-researchers noted that, at times, they felt that their counsellors failed to understand their experiences of being women within their cultural contexts. Even though such misunderstandings occurred, they did not always result in negative outcomes. Instead, according to co-researchers, the space for new cultural learning was created. This cultural learning likely occurred on several levels. More specifically, it should be noted that although the co-researchers had reservations about their counsellors' ability to relate to them based on ethnicity and culture, they likely gravitated towards more universal ways of connecting to their counsellors (i.e., gender). In turn, the counsellors appeared to have modified their counselling approach to better fit their clients' views.

I think one of the big things that affected my therapy was my religion. It's a different religion so people might not understand it and how it all works and how we were raised

and the way the women are treated and how they are certain rules that women have to obey. Here things are different. There are no rules for women to follow, and there is no undue pressure imposed on them. I was raised in a culture where I thought that oppressing women is a normal thing. When I shared this with people in the past, I was told that I experienced discrimination. I did not think that was my experience. That was just the way of life. So I tried to explain this to my counsellor, but I am not sure that she was on the same page as me regarding these issues. (Fatima, age 37)

Although my counsellor understood me most of the time, there were moments when I left my sessions wondering if she truly knows what I am going through. I am not sure she understood what being a refugee woman from my country really meant in this society or any other for that matter. What was very positive was the opportunity to come back and talk to her about it. Whenever I raised an issue in counselling, she listened, apologized for misunderstanding me, and invited me to tell my story again. At those times, I felt most respected as a human being. I felt that she did not view me as a refugee or as an immigrant. She viewed me as a person. (Nera, age 37)

Misunderstandings such as these discussed above created new opportunities for discussions between clients and counsellors. Such discussions strengthened counsellor-client interactions and positively influenced clients' interpretations of counselling. It is not unusual for refugees to hold prejudicial and discriminatory attitudes towards the members of the dominant culture. These attitudes are likely connected to refugees' overall adaptation experience. However, it appears that when both refugee clients and counsellors are open to negotiating cultural differences, the counselling process evolves in a positive direction.

Pseudofriend. An interesting concept emerged from co-researchers' interviews about what role their counsellors played in their life. Although counsellors' professionalism was important, co-researchers related to their counsellors on a personal level that typically does not take place and/or is not expected in the mainstream counselling.

She [the counsellor] took her time you know, gave me the time to respond and you know there were long pauses and no rush for me to answer or to think. It was just...just overall she made me feel very comfortable. I didn't have a feeling that I was sitting there with a counsellor. I had a feeling I was sitting there with a friend. (Lamija, age 41)

My counsellor was very welcoming to me. I think the fact that he had two daughters that were close to my age helped him relate to me more. He was almost like a pseudo-parent

to me; some kind of professional friend. To him, I was a person, not just a patientnumber. I was treated as a human being and that alone allowed me to be at ease and share my story openly. (Andrea, age 26)

According to co-researchers, the pseudo-friendship with their counsellors facilitated warm verbal exchanges that allowed for a free flow of ideas and counselling solutions. In return, co-researchers shared their stories with their counsellors in a more personal fashion without worrying about being scrutinized and categorized according to their presenting concerns. The initial surprise of interacting with a *friendly* counsellor facilitated a development of what later became a strong therapeutic relationship.

I must admit I was taken aback by the experience I had. Although I did not expect it, my counsellor comforted me in the most generous and possible way she could. Almost instantly, I felt I could tell her anything that was worrying me, or that I perceived to be a problem in life. Sometimes, I was puzzled by the closeness I felt to her. I mean I had friends in my life that listened to my troubles and worries. However, they have never understood the magnitude of my pain like my counsellor did. (Lolita, age 29)

It is evident that counsellors' personal characteristics significantly impacted coresearchers' engagement and subsequent work in therapy. Likewise, the professional competence also played an important role. For all co-researchers, a combination of counsellors' preferred personal characteristics and professional skills formed a strong basis for continuation of counselling.

Professional Competence

For refugee clients, professional competence refers to counsellors': (a) specialized experience, (b) non-prescriptive approach to clients, and (c) curious stance from which counsellors investigate their clients' struggles, therapeutic solutions, and alternative meanings. For co-researchers in this study, it mattered that their counsellors possessed certain expertise in addressing psychological problems. It also mattered how counsellors used their expertise, and how they navigated exploration and understanding of their clients' stories.

Experienced healer. All co-researchers except one commented on the importance of finding an experienced counsellor who was knowledgeable about their profession. The counsellors' experience represented a legitimate and useful source of help. It also reinforced the co-researchers' trust and allowed counselling to progress.

She [the counsellor] actually was professional and engaged me in a professional relationship...when she started talking to me I could tell that she knew what she was doing and that she had a lot of experience working with this [sexual assault]. So telling me what to expect in the therapeutic process was huge for me. Like I didn't know what to expect, but having someone with knowledge telling me this is what usually happens in the therapeutic process was reassuring...you know it's kind of nice to know that what's going to happen next and feeling terrible is a normal part of the process as well. (Milijana, age 40)

His expertise was evident in that he treated my story as very unique, and it did not matter to him that I came from Romania. He viewed me like a person, and he treated me no different from anybody else...he never pushed me to talk about things that I was not ready to talk about. Whatever I was comfortable sharing with him, he welcomed. He was never too inquisitive, and he never made me uncomfortable sharing anything that I was not at ease with. He was very professional in a sense that he knew exactly what questions to ask. (Andrea, age 26)

Co-researchers reported that the purposeful questions were a catalyst for building a trusting bond with counsellors. One co-researcher noted, "He [the counsellor] knew when to probe an issue, and when to leave it alone. For me that was a turning point because I knew that my trust in him was building more and more. I knew he was prepared to listen to me whenever I had something to say" (Andrea, age 29). When co-researchers were free to discuss their issues at their own pace, they formed new narratives and answered important questions. The majority of co-researchers noted that the choice of therapeutic technique was not important in promoting therapeutic change. However, when co-researchers perceived counsellors' suggestions or therapeutic exercises as purposeful, they engaged in therapy more readily and used therapeutic exercises more frequently.

She [the counsellor] also gave me numerous exercises and affirmations to help me stay on the right track between the sessions. They helped my healing process tremendously because I felt she was with me whenever I needed additional support and guidance...for example, the exercises of diaphragmatic breathing and understanding myself have helped me tremendously in my everyday life. They helped me approach my problems and issues in a different way and look at them through a different lens. Applying those various approaches affected me in the most positive way. (Lolita, age 29)

One of the things that my counsellor did that facilitated my healing process was introduce me to journaling. She noticed that at times, I struggled with saying what I needed to say. During one of our sessions, she pulled out a journal and gave it to me. She told me I could use it as a *book of me*. That really resonated with me because I never considered writing anything about me on the paper. When I came home that day, I began writing and I wrote for hours...if my counsellor had not introduced me to it [journaling], I probably would not have done it on my own. She was my guide when I could not find my way. (Nera, age 37)

Non-prescriptive attitude. Counsellors' non-directedness appeared to be an important factor in refugee clients' therapy. All co-researchers alluded to the importance of *telling their story at their own pace*, and using the counsellor as a guide rather than an authoritarian figure who had power to change their circumstances. Co-researchers noted that having an opportunity to answer the questions they had about their struggles on their own increased their self-confidence and self-sufficiency.

There was a trust built and you know at first I was looking for her [the counsellor] to give me answers for all the questions I had. But as I was talking, I was actually giving answers to myself and she was guiding me through it. I think that's what she wanted to do...to help me answer the questions myself. I think if she just straight up answered the...you know...issues I had, if I asked her how do I deal with this and what should I do...because I got advice from friends before but it was never the same way. She made me answer my own questions and that automatically helped me resolve all the stuff in my own head and made me think different. (Fatima, age 37)

She [the counsellor] was asking right questions, she was able to relate to me and meanwhile remain very professional. Just allow me to talk about it [the struggles]. And just by doing that I felt you know...um...I kind of understood myself better. Where I'm coming from and what's causing me to suffer. (Lamija, age 41)

Counsellors' non-prescriptive attitude motivated co-researchers' desire to resolve their struggles, reduce their guilt related to their experience of distress, and promote self-confidence

and personal integrity. One co-researcher reminisced about the time when she first acknowledged that she was not to be blamed for her struggles and noted,

I think I'm in control now regardless of what happened to me in the past. [Counsellor] making me feel um...not guilty. Making me feel not ashamed for what I had done and agree with me and ah...ah...just making me understand that I'm grown woman who's making her own decisions. (Lamija, age 41)

Another co-researcher explained how having a non-prescriptive counsellor made her feel like she is not the only one that was experiencing problems. She said,

My counsellor never told me what I should do or say. Having that freedom did create a direction and also, like I said, it made me feel like less of a freak. So even if you went home and cried for two hours after a session, that was perfectly normal and it didn't mean you were any more crazy than when you walked in. That it was just part of the healing process and knowing that ahead of time made it easier to deal with after. (Milijana, age 40)

Clearly, encouragement to explore their struggles and experiences on their own was helpful for co-researchers. On the other hand, using counsellors as interpreters of the therapeutic process moved the co-researchers towards new directions related to the relief from their psychological struggles

Curious investigator. The counsellor as a curious investigator promoted an atmosphere within which the co-researchers were viewed as the authors of their own lives. Co-researchers commented on how much it meant to them to create their own stories of their struggles and subsequent changes. The concept of self-change emerged as an important stepping stone in creation of therapeutically meaningful process.

She [the counsellor] didn't come with this complete set of knowledge that's very different from mine and then try to put it on me. She tried to listen to what I was saying, meet me where I was at, and tried to probe and find out exactly what I believed in. Then worked from there you know within my understanding and not trying to put this *hey everything is okay* kind of thing on me. Everything I did was okay but in addition, she actually tried to find out what I believed in and worked from that. (Milijana, age 40)

I remember my counsellor being really inquisitive. She asked me many questions that pushed me to sort the mess in my head and put all of the pieces of the puzzle together. Even though she did not impose her opinions on me, talking to her was very helpful. She did not know anything about my life, but she understood me. That alone allowed me to clear my head. I figured out how things that happened affected me, and I answered some difficult questions I had for years. I guess I knew what I needed to do for myself all along, but sharing it with another person really put it in perspective. (Fatima, age 37)

The majority of co-researchers were very aware of how much and how attentively their counsellors listened to them. The counsellors' curiosity was not only marked by the questions they were asking, but also by active listening and collaborative de-construction of clients' stories.

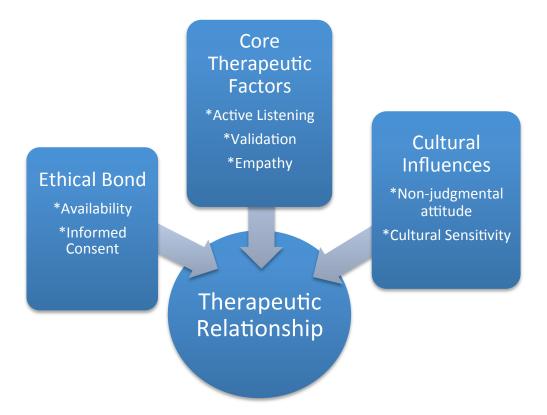
My counsellor helped me feel validated because she was paying attention to every word that I was saying. That was important to me. Every segment about every issue that I was telling her, she took with great consideration and broke it down to every detail in order to help me understand the situation and the issues I was struggling with as a whole. Looking at the *big picture* instead of only at its parts eventually led to my healing. (Lolita, age 29)

The recognition of counsellors' personal characteristics as well as professional competence opened a new counselling corridor for refugee clients. This corridor represented a path to possible restoration of their psychological well-being and development of a strong and collaborative working alliance as a cornerstone of a constructive human interaction.

Category Three: Therapeutic Relationship

Refugee clients perceived the therapeutic relationships they developed with their counsellors as one of the most important factors that influenced their counselling experience. The successful counselling as perceived by refugee clients necessitated both refugees and counsellors to remain open to building a bond characterized by counsellors': (a) strong sense of ethics, (b) utilization of core therapeutic factors, and (c) acknowledgement of important cultural influences.

Figure 3: Category 3 - Therapeutic Relationship



Ethical Bond

Refugee clients' interpretation of what constitutes an ethical bond differs somewhat from the mainstream definition of ethical conduct in therapy. Co-researchers elaborated that they perceived their counsellors to be ethical when they were readily available for appointments. Additionally, co-researchers discussed the process of an informed consent and noted that counsellors' willingness to discuss the essential components of therapy with clients, including: confidentiality and its limitations, counsellors' role in therapy, the risks and benefits of counselling reinforced their willingness to engage in therapy, and consequently build strong working alliances.

Availability. All co-researchers elaborated on the importance of knowing that their counsellors *were around*. They felt that knowing that their counsellors were just a phone call

away allowed them to challenge themselves more between their appointments and implement the ideas they learned in therapy in their everyday lives.

I think my counsellor was very open to me and he opened the space for me to talk about things that I would not talk to anybody about. He offered me his support no matter what. I could call him any time during the day, and I knew he would make time for me to see me if I needed to be seen. I booked appointments with him as I needed them, and he accommodated me in any way possible. (Andrea, age 26)

This co-researcher further noted, "He [the counsellor] also provided me with contact information for other available resources that I could contact if he was not available to see me".

Interestingly, easy access to their counsellors became a bridge between co-researchers' everyday lives and what was taking place in therapy. Having a place to go to and share their stories of struggles and successes increased the co-researchers' sense of confidence to deal with their struggles on their own.

There were times when I did not feel like going to therapy. Not because I did not like it but because I felt that I could fight my problems on my own. And my counsellor encouraged me to do that. She often told me to go out there and experience the world and try out the things I learned in therapy. She also always told me that she was not going anywhere and that all I had to do was call her back and book an appointment when I needed her. That made it so much easier to try living on my own and not rely too much on her. Just knowing that she's there. (Nera, age 37)

Another good thing was that my counsellor was easily accessible. She was located downtown and easy to get to. I attended counselling every 2 weeks, which was quite convenient for me because it gave me time to work on my problems between our sessions. (Fatima, age 37)

Informed consent. In the process of negotiating the therapeutic relationship with their counsellors, refugee clients came to regard the informed consent as an important aspect of the counselling process. Not only did informed consent reinforce the idea of confidentiality but also it re-assured refugee clients that their issues are taken seriously. Although mentioned in a different context previously, confidentiality as a part of an informed consent seemed to be

extremely important for all co-researchers. The more co-researchers understood that their information would be kept private, the more they engaged in therapy.

I appreciated the fact that she [the counsellor] kept my information confidential. She explained the therapy and what was going to happen in it. She talked about confidentiality form the beginning. She also listened to what I had to say, and over time I realized that she is there to offer support and help me develop good coping skills. Even when I doubted confidentiality, she took time to reassure me that my information will never leave her office. I guess I had some fears about signing forms at the beginning of counselling. It was really helpful to know what they were for, and that my dirty laundry will not be aired publicly. That really facilitated my therapeutic process. (Nera, age 37)

Confidentiality served as a protective factor for co-researchers. They felt more comfortable sharing their experiences with their counsellors because they knew that even if their stories were going to be potentially perceived as *bad*, they would still never leave the counselling office. For example, one co-researcher said,

I always refrained from sharing my problems with my friends for the fear of being judged. Being able to talk about my darkest secrets with a person [the counsellor] who knew nothing about me protected me in a way. I told her things that I never told anyone else. That really made me feel better. I respected that about her. (Fatima, age 37)

Counsellors' openness to discuss risks and benefits of counselling, as well as engage in revisiting an informed consent process for the duration of counselling fostered optimistic feelings related to counselling progress and outcomes. Co-researchers reminisced about the times when their counsellors took additional steps to make sure that co-researchers understood what was happening to them both during and after counselling sessions.

I think together my counsellor and I negotiated my healing process. She never let me leave the session without making sure that I was ok. Sometimes, I thought I was reaching my breaking point. I felt panic and hysteria over the questions she would ask me. In all honesty, I don't know how she did it, and how she pushed me to face what happened. By the end of each session, I was spent, I was tired, and maybe a little angry. But I always came back and she always took time to explain in what direction our work was going. This was change-provoking and she explained that this would happen. As long as I knew what was coming my way, it felt quite normal to go through it. (Milijana, age 40)

I really appreciated that my counsellor was willing to explain all of the good things that

could come out from counselling. Like better coping strategies and less anxiety and depression. She also told me about the bad things that could happen. For example she told me that things could get worse for a period of time just because I was going to talk about painful experiences. At first, I did not understand how could things get worse from what they already were, but later I got it. It was helpful though to have her explain pros and cons of counselling. At least I knew what I was in for. (Lolita, age 26)

Counsellor availability and confidentiality fostered co-researchers' recognition of additional therapeutic factors. All co-researchers noted core therapeutic factors necessary for the development of a strong working alliance.

Core Therapeutic Factors

The core therapeutic factors included counsellors': (a) active listening skills, (b) validation, and (c) expression of empathy. Although these therapeutic factors did not account for all of the change that co-researchers experienced, they did create a context for free narration of their stories. The perception that counsellors are able to place themselves in co-researchers shoes further strengthened co-researchers' trust and willingness to engage in the counselling process fully.

Active listening. Counsellors' active listening most certainly fostered the feelings of trust, and opened up a space within which the co-researchers were able to share the parts of their cultural heritage that they believed were relevant to counselling. Co-researchers became cultural teachers, and counsellors became cultural listeners. This created a mutual cultural exchange that shaped the cultural understanding of both co-researchers and counsellors.

As my trust increased, I took time to explain to my counsellor some things related to my culture. I don't know if she understood it correctly, but it seemed she was open to listening. Maybe she did not understand my way of life. However, she was willing to hear me out. I was never frustrated with her. I actually understood her because I was beginning to understand Canadian culture better. The more conversations we had about our differences, the more we related to each other. (Fatima, age 37)

The way the counsellors listened to their clients played an important role in how coresearchers responded to therapeutic questions. Having a counsellor who was willing to balance between actively listening to stories and asking purposeful questions to motivate the clients' disclosure represented a stepping stone in counselling. Without counsellors' active listening the clients' narratives would be constricted, and without purposeful questions, a deeper recounting of narratives would likely not be possible.

It was her [the counsellor] assurance...her...you know the way, the questions she was asking, you know the...actually looking like she was really listening to me. You know, just sitting there and nodding her head. (Milijana, age 40)

Feeling more comfortable and trusting of the person who was listening to their problems, allowed co-researchers to open up in ways they did not think possible. It also produced a sense of not being forced to tell their stories but actually feeling good about doing so.

What made my counselling work for me was the easiness that came with my counsellor. The appeal and warmth that made me comfortable to open up and tell her about my problems. She was very adamant about listening and focusing all of her attention towards me. Her positive energy impressed me and sparked my curiosity so much that I just simply had to continue attending our sessions. (Lolita, age 29)

I used to never talk about my problems. I always kept everything inside. Opening up to a complete stranger opened my eyes and made me experience [the] world in a very different light. I noticed that it was not so difficult for me to talk about what was bothering me. My counsellor allowed that to happen, and she made me feel that I am not the only one with problems. Like I said before, when I needed to talk she listened. When I needed to be silent, she allowed me to. She also created a sense of hope for me, and made me realize that going through tough times did not mean that I would not find solutions. (Fatima, age 37)

Validation. Validation served the purpose of acknowledging co-researchers' issues as legitimate and valid reasons to seek counselling help. Many equated validation with *normalizing* of their experience. When their stories were validated by their counsellors, they no longer seemed difficult to share and comprehend. Instead, the stories became a legitimate battlefield on which new and preferred meanings were constructed.

I have never felt that comfortable with anyone before. Maybe the fact that he did not know me personally helped. Whatever the case may be, I enjoyed time spent in therapy. His advice and guidance made sense to me...he also directed me very well in how to address each one of my issues. It was very helpful to feel validated and understood. (Andrea, age 26)

Validation equipped the co-researchers with a new route in life. Most echoed what Fatima (age 37) said, "My counsellor validated my feelings, listened patiently, and led me in a more useful direction." When counsellors validated difficulties that co-researchers were experiencing, the new perspectives were built and new understandings were created. Additionally, validation fostered new hope and pushed co-researchers to create the knowledge about themselves of which they were not previously aware.

My counsellor put things in perspective for me, which actually helped me a lot. I had these epiphanies, and I experienced depression and anxiety. My counsellor validated these, and taught me it was normal to feel this way. She also gave me hope, and facilitated my self-discovery. It was difficult but I reclaimed myself in the end. I don't remember that she ever did anything to compromise our therapeutic relationship. That was really great to experience. (Milijana, age 40)

Freedom to express their feelings openly motivated co-researchers to return to counselling and further explore their stories. This process was intensified when co-researchers recognized the counsellors' empathy and realized that even though their experiences were different, their counsellors were able to understand them on a deeper level.

Empathy. Experiencing empathy from their counsellors provided a therapeutic context within which the co-researchers perceived their counsellors as open, knowledgeable, and supportive. Co-researchers reported that empathy created a space for them to challenge the notions of power and disempowerment both within and outside of the counselling setting. Even when co-researchers had doubts about how much their counsellors could relate to them, those were deconstructed and reframed when empathy was present during the counselling sessions.

My counsellor was warm and genuine. As I was telling her what has happened to me, she mirrored back to me that she feels what I feel. I guess she was putting herself in my shoes, and was trying to understand my point of view. I felt she wanted to know me, and she viewed me as a person. (Fatima, age 37)

She [the counsellor] recognized my inner child. She would ask me about this little girl she was seeing. So that was very different for me because nobody asked me that before and I think those moments were very insightful. I felt that during those times she truly understood what it was like to be in shoes. She was able to connect with that part of me. I remember that and I often think that as the one of specific situations in therapy that changed me. (Lamija, age 41)

While reflecting on their experiences, all co-researchers emphasized the importance of an empathic counsellor. They not only elaborated on the appropriate personality match between counsellors and clients but also the importance of counsellors' openness to have contact with refugees in general.

When I was in college, I asked one of my professors who was also a psychologist, what do I need to know about the therapist when choosing one, and she told me to choose a therapist who could understand me, empathize with me, and who has a similar experience to mine. At the very least, I was told, I should find someone who has worked with people who had similar issues to mine. I do truly believe that counsellors can work effectively with refugees even when they do not have the same refugee experiences. However, they have to have some knowledge about refugee status. I remember telling my counsellor that she should have a refugee friend to learn more about refugees in general. I think that the stepping stone in obtaining knowledge about refugees in general, their issues, and their status could help counsellors tremendously to empathize with their clients in therapy. (Lolita, age 29)

Cultural Influences

The notion of interacting with a non-judgemental counsellor who was able to demonstrate cultural sensitivity motivated co-researchers to freely explore their cultural heritage and its overall impact. Additionally, it equipped them to become more open to learning about the Canadian culture, decide which aspects of it to incorporate into their lives, and open themselves to the new cultural experiences.

Non-judgmental attitude. Previously, I discussed the counsellors' non-prescriptive attitude (counsellors not imposing his/her views on clients) as an important counsellor factor. Within this category, non-judgmental attitude strongly relates to clients' perceptions of not being judged based on their cultural background. In my conversations with the co-researchers, the counsellors' non-judgmental attitude emerged as an important cultural element in the development of a therapeutic relationship. According to co-researchers, the non-judgmental attitude was reflective in the counsellors' approach to advising their clients, as well as in the counsellors' understanding of various cultures.

In my sessions, I never felt that my story was judged. Instead, I felt really comfortable. My counsellor's advices were non-threatening and non-judgmental. I was there to tell my story, and he was there to listen...he had a vast a vast understanding about cultural diversity, and I was very pleased that he knew a lot about different cultures including mine. (Andrea, age 26)

But the therapist didn't, she didn't assume anything. She didn't assume that I understood Canadian culture or anything like that. She actually tried to find out where I was based, where I was situated and then work with me. (Milijana, age 40)

Approaching the clients openly while suspending their judgment was extremely useful for co-researchers. In many instances, co-researchers stated that sharing important cultural information with their counsellors created a space free from prejudice, discrimination, and judgment. This not only referred to counsellors' worldviews but also to clients' views and beliefs about the culture in general.

Most of all, I appreciated that she [the counsellor] did not judge me. She never judged me. She learned about me just the same as I learned about her. Even when she appeared puzzled by my words, she asked for clarification. She often referred to me as her cultural mentor. (Nera, age 37)

Three co-researchers disclosed that sometimes they perceived their counsellors as somewhat judgmental. However, they explained that after a deeper reflection, they realized that

they were testing their counsellors and even wanting them to disagree with their views. For example, one co-researcher noted,

Through those first few sessions I realized that it was not her who was judging me, it was me who was resisting. You know opening up and talking about it [problems] and judging her so...most of them [disagreements] were based on what I actually deep down, strongly disagree [with] and disbelief about the culture I am coming from. But I was still saying those things out loud as if I wanted her to disagree with me. (Lamija, age 41)

Through negotiation of personal assumptions and beliefs related to counselling, coresearchers recognized the cultural sensitivity as additional vital element in a therapeutic relationship. Co-researchers likely experienced the dissonance between their own judgmental attitudes and the expectations they had for their counsellors. In order to reduce and/or eliminate this dissonance, co-researchers embraced the cultural learning that they were previously resistant to. This further clarified the therapeutic process for co-researchers, and allowed for stronger working alliance to develop.

Cultural sensitivity. According to co-researchers, cultural sensitivity was not only perceived within the counsellors' willingness to acknowledge their clients' cultural backgrounds and cultural differences, but also within their dedication to acknowledge their clients as human beings. When counselling interaction was perceived as equal, the therapeutic relationship flourished.

The most important thing about my counsellor was that she did not come with predetermined set of values, and she did not impose her worldview on me. She tried to meet me in the middle, and explore my beliefs. She then worked from there to help me create changes I wanted. She actually tried to understand me. (Milijana, age 40)

This co-researcher further noted,

I think it is important for counsellors to expand their theoretical knowledge, and strengthen their professional stance. Obtaining [the] right education and skills is the first step. Being open-minded and culturally sensitive is also important. Counsellors may not be comfortable listening to things that do not align with their values, but they have to be

prepared to hear them. Suspending prejudices and stereotypes is a difficult job but it has to be done.

Co-researchers reflected on the importance of counsellors' cultural knowledge and identified the need for counsellors' understanding of different cultures. According to them, when counsellors understand that a refugee clients' experience is unique, the counselling process becomes more genuine.

It would be very beneficial for every counsellor when trying to counsel refugees to learn a lot about their culture and you know where they're really are coming from. Because I don't think every counsellor can have the same approach to refugees from I don't know like Yemen. Like they would have um...a refugee from Rwanda, never mind every situation is unique even if it's from the same culture, but I think that would be the number one thing. And I felt that she [the counsellor] kind of did understand although she's not from the culture where I am coming from and she knew a lot about my culture. (Lamija, age 41)

When discussing occasional cultural clashes with their counsellors, co-researchers described their own ability to stand up to cultural differences and welcomed differences of opinions openly. According to co-researchers, standing up to cultural differences meant suspending their own rigid views and welcoming new cultural understandings into their cultural framework. Deeper exploration of important factors (e.g., family, education) that may have important cultural implications for the therapeutic relationship fostered further cultural understandings.

In terms of cultural clashes, I think I have lived in Canada long enough to not be affected as much. I went to high school and college here, and I adapted to the new life easily. However, my roots and my background were still noticeable, and they played a big role in my life. This is something that my counsellor acknowledged during our first session. I felt I was understood when we discussed the topics of family, connection I had with my parents. My counsellor even emphasized that due to my cultural background, my ties to my family were stronger than her ties to her family. She even stated that she believed that close relationships that I had with others played an imperative role in releasing my feelings and overcoming my struggles. (Lolita, age 29)

When cultural differences between co-researchers and counsellors were perceived as too big, co-researchers often felt that they needed to present themselves in a more favourable light. For example, one co-researcher stated,

When I reflect back on my counselling, I can say that there were some cultural differences between my counsellor and me. I was coming from a completely different culture, and I assumed that she would not understand my way of life. At times, I felt that she could not understand my point of view, and that she was not clear about some things I was telling her. I did not hold grudges against her. I just figured that our cultures were too different. Sometimes, I even tried to present myself in a best possible light so that she could understand me better. Over time, I realized that she wanted to learn more about my culture, and that she was not clueless. (Fatima, age 37)

The mutual openness, and willingness to learn about each other's worldviews and cultures, decreased co-researchers' concerns about cultural differences. It appears that co-researchers and counsellors engaged in a double dialogic process through which they explored, examined, and negotiated cultural differences. It became evident that mutual openness to share their views about culture, religion, environment, and diverse worldviews served as a catalyst for honest and open interaction. Over time, co-researchers shifted their attention away from cultural disagreements towards mutual respect. This significantly strengthened the therapeutic relationship and positively contributed to the co-researchers' progress in counselling and their overall adjustment to Canadian society.

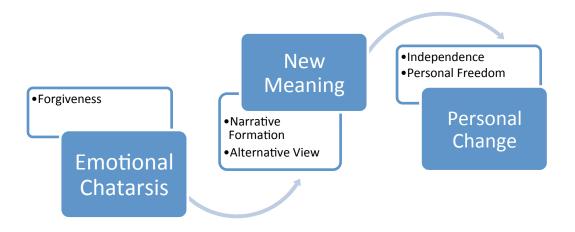
I think over time, I stopped paying attention to cultural differences between my counsellor and I. We have found a place of mutual regard for each other, and we exchanged our experiences. She taught me how to navigate the Canadian culture effectively, and I, in turn, shared the most important parts of my culture with her. I think we came together through this counselling process to understand each other as unique human beings. (Nera, age 37)

Category Four: Client outcomes

Despite experiencing their own levels of distress, new cultural contexts, and navigating a completely unfamiliar environment, co-researchers in this study placed importance on their well-

being. In an attempt to feel better and function effectively in the new environment, they experienced an emotional catharsis that led them to creation of new meanings and the intense personal change. The discussion that follows is an amalgamation of the co-researchers' cumulative experiences of counselling and subsequent counselling outcomes.

Figure 4: Category 4 – Client Outcomes



Emotional Catharsis

For co-researchers in this study, open and blunt expression of emotion was an unfamiliar concept due to personal, social, and cultural constraints that influenced their overall development. Although they experienced a wide range of emotions throughout their counselling process, when asked how emotional catharsis presented itself, co-researchers responded that it took a shape of forgiveness. Forgiveness gave co-researchers a sense of independence that promoted self-change and personal growth.

Forgiveness. Co-researchers struggled with guilt and shame related to their psychological problems and decision to come to counselling. They frequently ruminated about damaging their family's honour, and re-victimizing themselves. Additionally, co-researchers

found the outcomes of emotional catharsis to carry more meaning then the actual catharsis itself. The notion of forgiveness that resulted from an intense emotional expression exposed the coresearchers' desire not only to forgive themselves for what they perceived as personal shortcomings but also forgive their families and accept them as imperfect but important.

Counselling was helping me...huh...making me I think feel um...not guilty. Making me feel not ashamed of what I have done. Being able to relate to me and agree with me and ah...ah...just making me understand that I'm my own person. (Lamija, age 41)

This co-researcher further elaborated on the notion of forgiveness and noted that as a result of discussing her feelings in counselling she was able to accept her refugee identity and understand that she was not responsible for how others feel about her own decisions. She stated,

There was a conflict within me already. Otherwise, I wouldn't be a refugee; I wouldn't have run away from my family. But what's very typical for a woman who, from what I later learned from similar situations like mine, that there is guilt and there is a shame because you did this to your family. Because God said differently and Koran said differently and you know you're shameless and you're dirty and there should be so much guilt about it. So talking about it helped me understand that...you know...that's not the way it supposed to be.

Seeking counselling help and subsequently learning to express their feelings in the form of an intense release facilitated co-researchers' direct and indirect self-forgiveness. Even when they did not conceptualize this in terms of self-forgiveness, it was implied in the accounts of their stories.

I would come home after our sessions, and I would cry and cry. I would cry for hours but over time, it got better. My counsellor sort of guided my story that needed to be told. Later on, I realized everybody has trauma. The more people you talk to...everybody has gone through something terrible. I did not have to be schizophrenic to go to counselling. I found something and someone who helped me see things differently. That's how that changed for me. It was ok to acknowledge what happened. (Milijana, age 40)

I was never happy with how I felt inside. Terrible things happened to me and I always thought that it is better if I never talk about them. But they were heavy; they were pressing me...I had dreams and nightmares, and I thought about them constantly. And I thought that I was a bad person. I was so ashamed of who I have become and of not being able to fix it. When I started talking about it and crying about it in session, that is

when I finally began forgiving myself for who I am...or I guess who I was back then. It was very powerful to get to the point of being ok with your own trauma. (Nera, age 37)

From emotional catharsis and forgiveness a new journey was born – a journey with a destination. Although most co-researchers did not know how their destination actually looked like, all could start picturing the shape their story plot was taking.

New Meaning

The new meanings were contingent upon the co-researchers' multiple understandings of their narratives, the ability to critically reflect on their experiences, and facilitation of self-growth. For all co-researchers, the meaning-making journey was desired and necessary in order to resolve their issues. In this process, the storytelling became a vehicle and alternative view became a highway. With every new inch gained, a more elaborate and detailed story emerged. Consequently, the refugee clients move away from problem-saturated stories towards narratives that empower their lives and re-connected them with the subjugated parts of self.

Narrative formation. In telling and re-telling the stories of their experiences, refugee clients negotiated new meanings, challenged the existing values and worldviews, and incorporated new understandings into their personal framework. For the co-researchers in this study, the narrative formation represented an intersection on which they were able to verbalize the most challenging aspects of their experience and engage in alternative coping and subsequent resolution of their struggles.

It's just me speaking out loud and kind of you know doing narratives of what has happened and what my life is all about and you know what I have done in my life so far. And looking to overcome all the problems and issues...I never talked stuff out loud to myself so talking to her [my counsellor] in a way felt like I was talking to myself loud and talking about and helping myself cope with, deal with it, and resolve it. (Fatima, age 37)

The opportunity to tell my story in counselling was very rewarding for me. It opened me up to the world. I am not a person who really shares a lot with people. I am a private

person and I keep my problems inside most of the time. However, through therapy, I have found who I am. I was able to take things off my chest in a way that might have been uncomfortable sharing with a friend. (Andrea, age 26)

Some co-researchers offered a deeper exploration of the storytelling experience and shared their opinions about what it is like when refugees share their stories for the first time in counselling. They noted the fears, doubts, and discomfort that storytelling can cause, and pointed out how important it is for counsellors to welcome their clients' narratives.

Many refugees tell their stories first time in counselling. If counsellors cannot deal with that, they should not get involved because they could actually damage their clients, and prolong their healing. They need to be ready to welcome whatever experience comes through their door. Refugees already have a label that work against them everywhere. Just because someone is a refugee does not mean he/she should not be treated with respect. Understanding refugees' experiences opens up the therapeutic process, and helps people find new lives easier. (Milijana, age 40)

Narrative formation is not a linear process in which only refugee clients participate. The counsellors' ability to support their clients' storytelling process, understand when and how they need to narrate their experiences, and showing respect for clients' uniqueness cumulatively supports the creation of meaningful stories. The understanding of their clients' unique needs invited counsellors to recognize when storytelling becomes therapeutic as opposed to just telling a story. Having an ability to pick up on clients' cues and facilitate the narrative formation creates an atmosphere of openness and collaborative discourse necessary for therapeutic change to occur.

When I think about what was the most inspirational part of my counselling, I would have to say that it was the storytelling. I grew up in a culture where storytelling was regarded as very important. Through it people educated people, and that is how culture continued existing. Being able to tell my story in the way that it was never told before allowed me to find new meaning in my life. (Nera, age 37)

Alternative view. Refugee clients often formulated alternative views of themselves and their struggles as a result of their storytelling experiences. The meanings were generated from

development of alternative ideas, views, attitudes, and values. For the co-researchers in this study, the alternative view represented a consistent movement towards personal change and internal growth. Recognizing that the new understandings are emerging created new possibilities for co-researchers in terms of how they were planning to live their lives and deal with the new challenges.

We [my counsellor and I] were talking about my accomplishments. Whether it was career or education or something that I would feel very humble about and I think my humbleness and modesty was coming from the fact that I come from that Middle Easters, very Muslim strict family where I would not be acknowledged as much for all those accomplishments. So she [my counsellor] made me realize that I am equal to a man and you know it's ok. They are huge accomplishments and I should be proud of them. So I think that was the most important things for me. (Lamija, age 41)

For co-researchers, counselling was a process through which they gained an ability to challenge their worldviews and begin exploring their surroundings and experiences from a different perspective. This motivated the co-researchers' self-evaluation and encouraged incorporation of new considerations into their exiting frameworks.

Now I understand what counselling is a bit more and how it works because of my own experiences right. So it really helped me heal and helped me look at it [my problems] from a different point of view and evaluate myself from a different perspective. (Fatima, age 37)

I had a great experience being in therapy. In a way, talking to a counsellor demystified the whole counselling process for me and it really opened the doors to the world for me. I stopped thinking of myself as being a problematic person, and started thinking of therapy as a process through which I was able to grow and expand as an individual. (Andrea, age 26)

Re-framing of their worldviews inspired a strong perception of personal growth for all co-researchers. Counselling helped create a new insight into what kind of individuals they have been, they are, and they are becoming. Deep reflection into their struggles, worldviews, and cultures provided them with a new lens to observe a life through – a lens of new possibilities, a lens of independence, and a lens of a personal freedom.

Personal Change

Personal change emerged as an outcome of the co-researchers' willingness to challenge their previously problem-saturated narratives. Counselling reinforced the co-researchers' self-confidence, self-advocacy, and internal happiness. It provided clarity with regards to their cultural integration, personal adequacy to navigate new cultural environments, and overall ability to adapt to the new understanding of themselves.

Independence. For co-researchers in this study, finding a strong independent voice as women created a strong sense of equality and motivation to succeed in the new culture. The mere opportunity to direct their own counselling process facilitated the feeling of security when making their own decisions. For most, what took place in the counselling office spilled into their lives between the sessions and gradually became a preferred way of living.

I was more confident when dealing with men [as a result of counselling]...before the sessions and before I felt better, I would always take this inferior approach you know. Where I would praise the man and be grateful or I would be shy to express my ideas or you know take credit for accomplishments that were definitely mine. So the more sessions I had, I felt more confident and secure, so I would take the credit for something I did, or I would step up and state my opinion or say this is a good idea, or this is not a good idea. (Lamija, age 41)

The sense of independence became strongly pronounced in the co-researchers' daily lives. The experience of counselling reduced the stigma around their presenting concerns, and allowed them to view themselves as average individuals capable of ordinary living.

I am not sure if I can pinpoint when my healing began. I felt a sense of relief when I cried in front of my counsellor during the very first session. Every other session after that was revealing something about me that I did not know, or about my past. That new knowledge and new understandings brought me extra peace. Learning new things about yourself gives you hope that you can become your own person and function out there in a society. My experience of therapy was quite rewarding and helpful. Today, I feel better and I think I am on my way to becoming a well-rounded individual. (Lolita, age 29)

Personal freedom. All co-researchers discussed the meaning of personal freedom as a new task and a challenging undertaking. Cultural contexts that coloured co-researchers' experiences did not always seem to be permissive of the personal freedom. Thus, the negotiation of personal freedom required significant shifting of cognition, emotion, and behaviour. Some reported that it was extremely difficult to embrace the new freedom at the expense of giving up deeply ingrained cultural values. However, the majority of co-researchers were able to incorporate the sense of freedom in their personal and professional lives and utilize it in ways that seemed beneficial. This, in turn, contributed to their identity development and subsequent adaptation to the new life scripts they developed.

I'm a grown up now and I'm in a position of looking back and realizing that you know...forgiving my parents and that it's not their fault for the culture that they are coming from. Now I have a choice to be happy. I am free to be happy. Now I have a choice to live as an independent strong woman and live to my full abilities. Like having talents and enjoying and exploring life and doing all those things that I missed. And now my internal happiness should not be a reflection of what other people or what the culture or what my family's expectation is. Or what they think about me. It really comes from within and that I am making decisions and I'm having these thoughts. (Lamija, age 41)

Nothing extraordinary happens in the counselling room. It is just two people having a conversation. And yet when you are there, you feel like you are creating your own little miracle. I felt really free during and after counselling finished. I guess I figured that here in Canada I have a lot more say when it comes to what happens to me. I like that. I like that I can choose for myself. I like that I learned that in counselling. In the end, it was not about my trauma and nightmares. It was about learning to be free. (Nera, age 37)

Composite Depiction

When I began this process, I expected to find a miraculous cure for all of the refugees' problems. Somehow I pictured in my mind that refugees require a particular counselling approach – an approach unlike any other previously described in the counselling literature. What I found from a discourse I engaged in with my co-researchers was something quite different, surprising, and hopeful at the same time. In preparing for writing this composite depiction, I

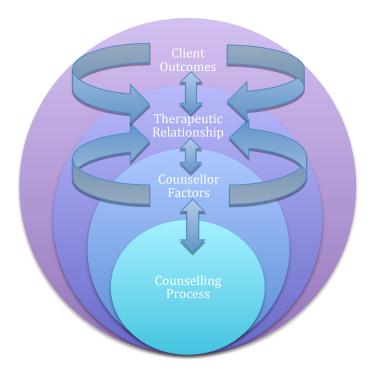
experienced a multitude of emotions. Nevertheless, I sat at my desk and I wrote what I believed represented my own as well as my co-researchers' experiences of counselling. When I completed my writing, I invited the co-researchers to read and reflect on whether the composite depiction I created spoke to their experiences of counselling. All co-researchers unanimously agreed that what I offer below represents our collective experience of counselling.

Refugee counselling begins with an initial counselling contact and subsequently develops into a process characterized by both negative and positive perceptions of therapy. Although negative experiences often represent refugees' discomfort with the new and unfamiliar process, the positive views of counselling serve as a catalyst for better adaptation to the new life in the new country. Although it is interesting to explore the nature of refugees' interpretations of counselling at the beginning and subsequent stages, it is also important to consider the context within which these interpretations develop.

Counselling process for refugees evolves in a thought-provoking fashion. Although it is often viewed through the eyes of stigma at the very beginning, there are certain factors that influence its evolution into a meaningful process. Refugees place the importance on their counsellors and often base their opinions of therapy on how they perceive the person who is supporting them. In deciding who the right counsellor for them is, refugees consider both counsellors' personal characteristics as well as counsellors' professional competence. When these two are not in balance, the trust is not built, the counselling process becomes challenging, and the development of a strong therapeutic relationship is hindered. Thus, the counsellors' ability to display their own humanness, approach refugee clients as individuals, and exercise professionalism and competence directly influences refugees' willingness to engage in the

counselling process, participate in the development of a therapeutic relationship, and achieve preferred counselling outcomes. As a necessary and preferred factor in the counselling process, the therapeutic relationship between refugee clients and counsellors develops through a detailed negotiation of ethical boundaries, counsellors' utilization of the core therapeutic factors, and the inclusion of cultural sensitivity in all aspects of the counselling interaction. When preferred counsellors' factors are in balance with refugee clients' expectations, the motivation for building the therapeutic relationship is increased, and favourable client outcomes are achieved.

Figure 5: Refugee Counselling Process



My co-researchers and I experienced our counselling journeys on a very personal level. Although we struggled with multiple issues upon our arrival in Canada that either originated in our countries of origin or as a consequence of resettlement and adaptation, we never truly considered counselling as a helpful resources. Instead, we engaged in our own coping process and tried to deal with our struggles on our own. Most of us decided to seek counselling help after we exhausted all other options and/or when we were directed to it by a trusted individual

(i.e., a friend and/or a teacher). Most of us struggled with our decision to enter therapy mainly because we held particular negative views about it. We were afraid of being labelled as crazy or mentally unstable. We worried extensively about shaming our families, losing control over our own lives, and being subjected to something that we always thoughts was for those other *crazy people*. Perhaps the initial contact with the counsellor represented our discomfort with the new culture and the confusion with what is expected of us now that we are inhabitants of this new society in which resources like counselling were not stigmatized at all. The internal battle that we experienced within us reinforced the already existing lack of trust towards those around us including counsellors that we chose to see.

I am not quite sure of the exact moment that marked the change in our perceptions of counselling. I can say that most of us began challenging our personal beliefs and values related to counselling when we began feeling safe and supported in the counselling room. I guess we all needed to know that we would not be hurt in this new setting and that what we are doing has some benefit to our well-being. Of course, feeling safe and supported were just a mere beginnings of our counselling journey. As we were becoming more open to the process and engaging in an open discourse with our counsellors, we began enjoying certain benefits of therapy. It was nice to know that we can share our experiences in an environment in which we were not interrogated, rudely challenged, and/or placed in a harm's way. Of course a few of us experienced therapy briefly previously and we hated the process. Such experience created a strong negative view of therapy and the therapist, and we struggled with the idea of going to counselling again. We were able to challenge our own discomfort and give it a chance again. It proved to be a very helpful and useful decision for us. Sometimes I wonder where we would have ended up if we decided never to return to counselling. For most of us, counselling

represented the freedom from the constraints of our own cultural views, and a passage into the new life in the new country. For many, it represented an acculturative passage into a better future.

For all of us, how counselling would turn out partially depended on our counsellor. We worried about this individual that we were going to see because we did not know if he/she would understand us. What if we tell our stories and they get thrown out? What if we allow ourselves to become vulnerable in front of this stranger and we get hurt? What if there is no help for us? If this does not work what are we to do then? All these questions plagued us but we continued going anyway. As time passed, we began noticing that there are certain counsellors' characteristics that we truly like and respect. We all agreed that personal counsellors' characteristics were of the outmost importance for us. We needed someone who was openminded and not cognitively and emotionally constrained. We needed someone who was prepared to hear our stories as a human being and not counsellor. We needed someone who we could temporarily view as our professional friend. Those of us who had a female counsellor experienced a strong bonding based on our gender. Sharing our inner most experiences with another woman created a certain female solidarity. Not only were we able to talk about our cultures but also collaboratively socially construct the meaning of a woman – a woman within our cultures and a woman within the world. What a wonderful gift that was for us.

Professional competence most certainly played a role in our counselling process.

Although we enjoyed an informal nature of our counselling, we recognized that certain counsellors' skills made us feel more comfortable and more motivated to work on our issues.

This was especially pronounced when we perceived our counsellors as experienced, non-prescriptive, and curious healers. It was important to us to experience such interaction because it

increased our trust not only of our counsellors but also of the entire counselling process. In our eyes, counsellors' humanness and professionalism could never be separated. They need to operate in harmony for the counselling process to progress and result in preferred client outcomes.

I often wondered when did we develop therapeutic relationship with our counsellors. Of course upon reflecting on this questions, I realized that the therapeutic relationship began developing as soon as we walked into the counselling office. I think for most of us, to perceive the relationships with our counsellors in a positive manner, we needed time and space to process our concerns, test our counsellors' trust, ethics, and cultural openness. For most of us, the first sign of a strong therapeutic relationship was a development of an ethical bond with our counsellors. Having reassurance that our information would be kept confidential and that our counsellors would be available to us when we are in need broke the ice. It is a wonderful feeling when one knows that basic human rights such as privacy and access to help were respected and honoured.

We all noticed when our counsellors actively listened to us, validated our stories and feelings, and showed empathy towards us. These were extremely important to us. I mean, we came to counselling because the support we were looking for elsewhere was not available. We could not talk to our friends and/or we did not want to because we feared their judgment. We could not talk to our families because we feared their wrath. We were all alone in our struggle until we stumbled across counselling and began realizing that we can tell our stories in a safe, private, and nurturing environment. Most of us wondered whether our counsellors would understand our cultures and how they impacted us. Some of us made our own assumptions that people from other cultures cannot understand us. We were pleasantly surprised when we

realized that we became cultural teachers as well as cultural students while in therapy. It is amazing what kind of knowledge people can create together when they perceived each other as non-judgmental and culturally sensitive. Naturally, the lack of judgment and cultural sensitivity did not just present themselves. Instead, they developed through a collaborative and challenging process during which we all had to let go of some of our pre-conceived cultural notions. In the end, I believe we co-created a new culture with our counsellors – a culture of human beings.

We developed strong therapeutic relationships with our counsellors – the relationships that were based on trust, mutual understanding, and reciprocal sharing. They enabled us to share our stories in a most private fashion and achieve emotional catharsis. For most of us, the emotional catharsis was a sign of gradually achieving our counselling goals and moving towards what we perceived to be preferred counselling outcomes. We all agreed that our final outcome was to finally tell our stories and narrate our experiences in a way that would release us from our struggle. However, we did not quite understand what telling our stories would entail until we actually engaged in the process of openly expressing our feelings. For many of us, openly expressing our feelings also meant engaging in forgiveness process. One might ask who were we forgiving? Some of us were forgiving our families for the lack of understanding and closemindedness. Most of us were forgiving ourselves for the shame and guilt we were feeling and opening a new corridor into the new meaning of our struggles and subsequently our lives.

The perception of the new meaning was born out of our narrative formation. We finally learned to tell our stories from different perspectives that enabled us to view our problems and ourselves through an alternative and a more desired lens. For many of us the experience was similar to one when a person who struggles with vision problems acquires prescription glasses and finally views the world in front of him/her in a clear fashion. I guess it is fair to say that

through the counselling process we learned to re-frame our worldviews, embrace our own independence, and achieve personal freedom. In counselling we re-connected with the parts of our identity that were buried deep down inside. Our voices became louder and our actions stronger. We decided not to give up on ourselves but instead move forward and make one step after the other until we reach our destination. Most of us probably do not know how exactly that destination looks like. Nevertheless, we are all walking towards it. Our eyes are open, our heads are lifted up high, and we are smiling. Now we know – we are no longer counselling clients, we are no longer individuals with struggles, and we are no longer just refugees. We are people in our own full right. Our lives zigzag and at times are quite unpredictable and even scary. So what is different about us? We no longer doubt ourselves and our own ability to change. We are not ashamed of ourselves. We no longer feel guilty. We just are – human beings caught in a moment of time, cherishing our new stories and walking through our lives free.

As for counselling, we view it as an experience coloured with ups and downs. Many of us would say it shaped us into individuals we are today. Would we ever go through the same process again? I think that if someone asked us this question individually, we would each say yes. Why? Because now we know that it is all right to ask for help, and we know that when we are extended a hand, it is often a hand that we need. In my mind, it is a hand of hope when hope is almost invisible. It is a hand of the new life.

Creative Synthesis

Creative synthesis represents the end of heuristic research. The researcher enters this process exhausted but completely familiar with all of the data (Moustakas, 1990). It can take many artistic forms but most commonly it takes a form of a narrative. Creative synthesis is not a

summary, but the inclusion of the researcher's personal interpretation of a journey of exploration of particular phenomenon from the beginning to end.

The creative synthesis in this study is portrayed in a story of an airplane caught in turbulence on its way into the unknown. It represents my own and the co-researchers' tumultuous journeys of counselling characterized by challenges, doubts, fears, and anxieties but ultimately culminating in creation of a preferred counselling story born out of collaborative human interaction.

Creative Synthesis: I Have Never Been on an Airplane Before

I have never been on an airplane before. I am sitting at the airport waiting for my flight and I am shaking. I have never been on an airplane before. Is it normal to be scared? What if something bad happens? What if it turns out that this flight is not for me? What if I made a mistake? What if? What if? I don't know if I can answer these questions. It seems to me that I have entered some new story today, and I am not quite sure if I belong to it. But then again, what story do I belong to? I have never been on an airplane before.

When I was little, I used to stare at the sky and imagine what it would be like to fly in an airplane. I would close my eyes and paint a picture of a traveler sitting in the middle of the airplane surrounded by countless rows of seats. At times I could imagine that flying was fun and that exploring the unknown parts of the humanity is only possible if one is courageous enough to get on to the airplane and fly away. Only I was never sure where I would fly away. I think that it was precisely that unknown that always kept me on the ground but never grounded me enough. In me lived a wild wolf that was not going to be tamed. In me lived a story that needed to be told, a journey that needed to be taken, a voyage that I needed to travel on. That is how ended up on the airport today.

I have never been on an airplane before. I am sitting at the boarding gate, my breath heavy, and my arms all cramped up. I am holding my bag tightly in my lap. That is all I have, and all of my experiences are in it. I am not going to let it out of my sight for one minute because it could be stolen. The mere thought of my bag being stolen is terrifying enough for me. I feel that I am sweating, and that my heart is racing like crazy. What have I gotten myself into? How did I end up buying this ticket? Why? I lift my head and for the first time in hours I notice that I am not alone at the gate. There are about six other women sitting in my close vicinity. Wow!!! I feel somewhat relieved that I am surrounded by others. I have never been on an airplane before.

I am trying to listen to the chatter but I cannot quite make out what these other women are talking about. All I can hear is that some of them have been on an airplane before. However, they don't seem to be excited about that experience. One of them approaches me and informs me that I am making a mistake and that flying on an airplane is not fun at all. I try to ignore her but she is adamant about telling me that flying on an airplane is intimidating. When I ask her why she is at the airport, she tells me that she has to be here and that she does not have any other place to go. How strange!!! I, too, have nowhere else to go but to board that huge bird-like formation and hope that I will survive my first ever flight. And yet...I am scared...I have never been on an airplane before.

Before I have time to collect my thoughts, I hear the voice over the speaker, "This is the boarding call for the passengers who are travelling to the unknown. Please collect your baggage and form a line in front of the gate. Have your passports and tickets ready. We will begin boarding momentarily". I grab my bag and stand up. My heart is beating, my mind is

clouded, my hands are cold. What have I gotten myself into? I have never been on an airplane before.

As I enter the airplane, I notice that it is empty. I soon realize that there are only seven of us flying that day. Ha ha...only seven passengers heading into the unknown. How ironic to say the least. I quickly find my seat. I am happy that it is next to the window. I make a plan that I will keep to myself and try to sleep during the flight. Maybe if I can fall asleep I will not even notice that I am flying in an airplane. I close my eyes and I let my mind wonder. Soon I hear the thunder coming from the engines. The sounds are so loud that I jump in my seat. The flight attendant approaches me and says, "Welcome aboard the flight that is heading into the unknown. We are pleased to have you. There is nothing to worry about. The pilots are welltrained and dedicated to make your trip most enjoyable. Can I offer you anything at this time?" I look at the flight attendant, and I am surprised by the warmth of her face. She is smiling, her mouth full of white teeth, and her eyes are sparkling. I shake my head letting her know that I do not need anything. She smiles back and she tells me, "I can see that you have never been on an airplane before. There is nothing to worry about. Just breathe. It will be over before you know it." I sourly smile back and make a note to myself that I am already on an airplane and there is nothing I can do about it. Oops, we are moving!!! It is the beginning of something new...or maybe it is the beginning of the end. Whatever it is, I am on an airplane now and I might as well fly because I am certain that it is too late to ask to get off.

As the airplane takes off, I realize that I cannot say anymore that I have never been on an airplane before because I am on one now. As the giant bird lifts up into the air, I think to myself that the flight is not so bad and that everything will be ok. Deep down inside, I doubt my own words. After all, I have no idea about what takes place on an airplane. I am scared, upset, and

maybe even a bit depressed. I do not trust anyone on this aircraft. I especially do not trust the pilot. The other women who are travelling with me do not look happy either. Their faces show fear and anxiety. I am very unfamiliar with what one should do while on an airplane. I stand up and walk around. The flight attendants seem nice. They constantly ask for my feedback about the flight and whether I need anything. What a strange group of people!!! Nobody ever cared about how I felt before. As I become a bit more comfortable, I begin talking to them a bit more. I find out that the journeys on the airplanes are quite different from journeys in trains or cars. At times, they can get quite scary. Flight attendants tell me that usually occurs because of the noise or the outside wind that interferes with the flight itself. I am beginning to like this conversation because I am noticing I am learning a lot. Somehow the flight attendants are reassuring and they comfort me when they notice I am scared or uncomfortable. And yet, I am not fully present during this flight. My mind is elsewhere and I keep worrying about what might happen before this journey is over. After all, this is my first time I am on an airplane.

I decide to talk to other passengers on the airplane as well. My thoughts are that if I check in with them, I will trust this journey a bit more. Maybe even trust the pilot a bit more. I truly enjoy the conversation with other women on the plane. I learn a lot about their experiences and I realize that they are many things that we share. We are all scared but we are also open to experiencing this journey fully. Collaboratively, we are finding ways of how to understand ourselves and how to allow ourselves to experience flying in an airplane the best we can. I cannot help but think that if we survive this flight we are going to become citizens of the world. We will no longer belong to a group of people that has never been on an airplane. The prospect of the new worldview brings up warm feelings inside of me. I like the idea of belonging to the world and not being categorized as a person that has never been on an airplane.

As we continue to fly, I notice that flight attendants are truly good human beings. I doubted them at the beginning but as we engaged in conversation more, I become conscious that they too were people just like us. However, there was something about them that set them apart from other people I met in my life. They were open-minded. They wanted to hear about their passengers. They were also all women like us, and they wanted to comfort us as women. I really liked that. It gave me the sense of freedom within the aircraft. Most of all, I experienced them as being special friends of mine for the duration of this not so easy experience. Knowing that I could connect to them on a more personal level took away this leery feeling that something bad was going to happen. I liked that they were very professional in their job and yet very comforting and nurturing as individuals. What an excellent combination for a flight attendant, especially when they serve passengers on very long flights. After all, I can talk to them if things get out of control. They understand that I come from a different world and I am on an airplane for the first time in my life.

The flight is getting awfully long. I guess it is like that because we are flying into the unknown. I worry about how the unknown looks like and whether I would like it there. I know I have to endure many more hours before I reach my destination. All women on the plane feel the same way, and some even think of giving up. However, we all know that giving up is not an option because we are in the air already. What a dreadful journey this is becoming. Sometimes I am struggling so much that all I can do is stay seated and pray to God or some supreme divine being that this voyage will soon be over. The only thing that keeps me afloat is the relationship I developed with flight attendants. Over the last few hours, we became really close. I even shared some of my personal stories with them. I told them where I came from, what brought me to an airplane, and what I am hoping to do with my life. I feel good because it seems that I can

confide in them and not worry that they will tell other passengers about my struggles. The bond grows stronger every hour I am on this airplane. I think they understand me. What they tell me makes complete sense. Most of all, I like their encouragement to continue being open to the experience of flying in an airplane. I really like how they challenge me because I need a little bit of that. As everyone knows by now, this is the first time I am on an airplane.

Just as I thought that things were under control, I hear the pilot (need I say that the pilot did not speak to anybody this entire flight?) say, "Ladies, please return to your seats and fasten your seatbelts. We are entering a very strong storm and we are going to experience a big turbulence". Wow!!! Whose voice is this? How did this happen? What is this turbulence about? Flight attendants look worried but not panicked. Other passengers are scared. They are looking around and staring through the windows to catch a glimpse of that terrible storm and the turbulence it is bringing along. Hmmmm...I can't see anything. The silence on the aircraft is spooky. Nobody is talking to anybody. The woman that is sitting next to me grabs my hand and tells me, "We will be ok. I know. We survived worse things in life". I can't say anything. I am choking. I am in panic. I am done. I should have never done this. I have never been on an airplane before.

When the storm hits, we all start screaming. I grab a hold of my seat and I curse myself because I did not listen to flight attendants' safety speech at the beginning of the flight. Soon I hear the pilot say, "Ladies we are officially in the eye of the storm right now. We have no choice but to fly right through it". Fly right through it? What does that mean? Oh my God, I will never make it. People around me are terrified. We are all flying right through the storm not knowing what awaits us once and dare I say if we get out of it. For a brief moment I think to myself, "What a stupid idea this trip really was. If I did not challenge myself to fly in an airplane, I

would be on the ground now and safe". Just as I was thinking that, I realized that I am in the midst of the perfect chaos and that the only way to survive this ordeal is to brace myself and hope for the best. The aircraft (although quite big and strong) now seems to be at the mercy of something much stronger and much more powerful from what any one of us could ever imagine. The winds are hitting it from all sides, causing it to fly crooked, lifting it up, and dropping it down, shooting it through the air like it is a piece of useless paper. The airplane is shaking, the lights are flickering, and the air inside is cold. Suddenly, the oxygen masks get released from the overhead compartment. Oh man!!! I think to myself, "Now I am in the real trouble. There is no way out". I grab the mask and place it on my face. I take a few deep breaths and decide that if this is the last day of all of my days, maybe I should reflect on what I have done and make my peace with what I will never possibly have a chance to do. I close my eyes and the first thing that comes to my mind is, "I have never been on an airplane before".

It is funny how people feel when they are faced with something inevitable. I guess we all have ideas about what we would do if we were in the midst of a catastrophe. What we actually do is quite different from what we imagine. I am sitting in my seat, the seat belt is fastened, and the oxygen mask is on my face. My eyes are closed, and my mind is focused on the fear that is attached to my diaphragm. Its grip is so strong that I find it hard to breathe. The flight attendants are encouraging me to take deep breaths and work through it. At times, they are somewhat direct and I find their words a bit offensive. Nevertheless, hearing their voice helps me think things through. After all, they are in the same boat (or the same airplane) I am in.

As we are plowing through the storm, I notice the shift in my thinking. My life is passing before my eyes, and I realize that there are things, people, and places I need to let go of. I am no longer focused on my fear and the fact that I may not live through this storm. I am focused on

letting go, and acknowledging myself completely. Somehow the fact that I am in an airplane makes sense. I need to be on it. I need to be on it in order to say goodbye to the life that I was living on the ground but never grounded enough. I need to be on it to part ways with my fears, pain, and sadness. I need to be on it to create the new meaning...not just any meaning but the actual life meaning. I need to be on it to learn how to live life again the way I want to and not according to some prescribed rule of the majority. I need to be on it because I cannot battle this alone. I need to be on it because the flight attendants are there to assist me in my journey. I need to be on it because I am the creator of my own life, the life I prefer, and the life I deserve to live. Only this storm is messing this up and I am hoping that it will soon be over. Or at least it will die down a bit. I close my eyes and listen to the sounds the wind outside is making. The airplane is not shaking as much anymore, and the lights only flicker occasionally. The wings are now more leveled, and the noise around me is becoming bearable. Although the storm outside is still raging, I somehow manage to collect myself and imagine the end of it. And the end that I am imagining is actually tangible. I don't think I would even call it an end. I would probably call it a new beginning. One of many that I will have in this lifetime. Even the turbulence does not seem so terrifying anymore. Instead, it seems necessary at this moment and it is producing an emotional catharsis within me. One that I obviously needed to experience in order to overcome this ordeal. I wonder what other women on the airplane are feeling, and I guess by the look on their faces that they, too, are experiencing this journey intensely. Our eyes meet and we reach some sort of a silent agreement that we, together, will prevail and complete our voyage no matter how unpredictable and miscalculated it really is. After all, most of us have never been on an airplane before.

In the midst of chaos, I doze off into some kind of half-sleep. My heart is no longer racing, and I don't feel any kind of fear. The airplane is slowly returning to its leveled position, and the turbulence is gradually disappearing. I feel some strange peace in my soul. It seems as if I had just snapped out of something that had a strong grip on me for what appeared to be a very long time. I guess to me it appeared to last a lifetime. As I open my eyes, I notice that all seven of us are sitting close to each other in the middle row. We are not necessarily clear on how we ended up in a same spot, but all of us know that after this our lives will never be the same. One of the women extends her hand to me and I grab it, and the rest of the women follow. We hold our hands tightly in silence and nod to each other. At that moment we know – we have made it. We have a new perspective, new meaning, and new outlook on life. Everything that we dreamed of now seems possible. We are renewed, re-affirmed, and no longer interrupted in this journey we call life. The flight attendants smile at us as if they are saying, "We knew all along that you are strong and that you can survive the storm". It makes me feel good to know that even when I did not believe in myself, there was someone there that never doubted my ability to triumph over the turbulence caused by the storm. After all, the flight attendants were on an airplane many times before.

The airplane is landing slowly. In the distance, I see the mountains. I am not sure what time it is and I have no idea how long I have been flying. I am certain that it must be dawn because the sun is rising. I hear the pilot's voice on a speaker say, "Ladies, we will be landing shortly. Thank you for being patient and courageous while we were battling the storm. I wish you a pleasant stay in a place that no longer breathes uncertainty. Enjoy your new life and remember that you alone created a space for the birth of meaningful memories, new beginnings, and preferred lives. It was an absolute pleasure having you on this flight." The sound of the

pilot's voice sounds ominously familiar. Why do I know this voice? Who is this person? How do I know her? And then it finally occurs to me. I know the pilot because I AM THE PILOT. And I have been on an airplane all along.

CHAPTER SIX: DISCUSSION OF FINDINGS AND CONCLUSION

In the previous chapter, I outlined a detailed description of categories and themes, composite depiction, and creative synthesis of findings. In this chapter, I connect the research findings of this study to the existing literature on refugee counselling. I begin this chapter with revisiting the research questions and objectives. I discuss the contributions of the research findings to the current academic literature. I explore the implications of the research findings for research and practice. Within this section, I focus on the discussion of foundations, conceptualizations, and future opportunities in refugee counselling. Specifically, I discuss: (1) the role of common therapeutic factors in refugee counselling; (2) culture-infused counselling competence; (3) assessment; (4) counsellor training; and (5) promotion of social justice. Fourth, I explore the limitations of this research study. Fifth, I propose specific suggestions for future research. Finally, I close this chapter with an overview and personal conclusion for this chapter and completing the dissertation.

Research Questions and Objectives

In preparation for writing this chapter, I found myself returning to the question: "What was the purpose of exploring refugees' experiences of counselling?" My expectation was to engage in discourse with co-researchers that would result in offering something new, insightful, and deep about refugee counselling. When all interviews were completed, and data was analyzed, I still could not pin point what was the possible significance of my dissertation. I did not find anything new, there was no special refugee counselling approach, and all I really learned was that refugees often do not require to be treated differently from anybody else; or so I thought. Then I realized that perhaps the discourse surrounding the refugee counselling needs to change. I have spent my entire academic career studying about the importance of culturally-

friendly and culturally-relevant counselling. Although I always understood why including cultural influences in our professional work is essential, I never truly managed to wrap my head around how to put it in practice. A closer look at the research findings of this study tells me that perhaps the field of refugee counselling needs to move away from constantly refining the theoretical underpinnings of culturally-friendly counselling and move towards the integration of multicultural theory and practice.

The main goal of this research study was to explore the refugees' experiences of counselling. Additionally, the goal was to provide an atmosphere in which refugees could provide their perspectives on what works and what does not work for them in therapy. Finally, the goal of this study was to identify the contributions of research findings to the current literature, discuss implications for refugee counselling, and suggest future research directions. In addition to exploring the refugees' experiences of counselling, the following research questions were addressed:

- 1. What facilitated the healing process for refugees in counselling?
- 2. What complicated the counselling process for refugees?
- 3. What aspects of counselling were particularly helpful for refugees?
- 4. What would specifically be helpful for counsellors to know in order to support refugees in counselling?

Contributions of Research Findings to the Literature

Although the mental health of refugees has been a focus of researchers for several decades, refugees and refugee counselling continue to be underrepresented and often neglected topics in the counselling literature in Canada (Bemak et al., 2003; Thappa & Hauff, 2005). When I began writing this dissertation, I was surprised how little is known about refugees'

perspectives on their experiences of counselling. As my research progressed, I became aware of the need to record refugees' narratives and produce a document that carefully outlines the nature of the counselling process as it gradually evolves for refugees who decide to seek counselling help. I have organized this section according to the four key categories identified in Chapter 5:

(1) Counselling process, (2) Counsellor factors, (3) Therapeutic relationship, and (4) Client outcomes.

Category 1: Counselling Process

The themes identified within the category of counselling process are in line with the existing literature that explores the challenges associated with the provision of culturally-responsive counselling to refugees (Arthur et al., 2010; Pedersen, 2002). The current understanding of refugee counselling includes the focus on deconstruction of refugees' common presenting concerns (Al-Roubaiy, Owen-Pugh, & Wheeler, 2013; Bemak & Chung, 2002; Wilson, 2004), as well as the inclusion of multicultural counselling competence in all aspects of therapeutic process (Collins & Arthur, 2007). Counsellors are encouraged to increase their awareness of the unique challenges that refugees face (Gallardo, 2013). Refugees in this study experienced numerous challenges influenced by unique personal, familial, cultural, and social factors (Al-Roubaiy et al., 2013; Bemak & Chung, 2002; Wilson, 2004). Such challenges reinforced refugees' perception of multiple losses, forced exile, trauma, and in some instances, a complete disruption of their lives (Bemak et al., 2003; Birkett, 2006). In an effort to create some balance in their already disrupted lives and fully engage in acculturation and adaptation process, refugees in this study sought and accessed the available counselling help.

For refugees in this study, the initial experience of counselling was marked by mixed negative feelings, and negotiation of pre-existing knowledge of counselling. In order to

consolidate their pre-conceived notions of counselling with their new experiences necessitated a detailed re-examination of their own worldviews, values, and beliefs related to counselling and overall adaptation to the new way of life. This finding is consistent with the existing literature suggesting that refugees share dissimilar interpretations of their challenges (Bala, 2005).

Refugees' experiences are often influenced by multiple personal and social perceptions, as well as broader socio-cultural discourses (Lee, 2013).

According to the refugees in this study, the initial negative perception of counselling resulted from their unfamiliarity with Western counselling concepts, fear of stigma, and lack of insight into their psychological struggles (Bemak et al., 2003; Neufeldt et al., 2001). Refugee clients often struggled with discussing their issues because they felt vulnerable, ambivalent about change, and uncertain about their future (Kallivayalil, 2013). Vontress (2001) pointed out that refugees' and counsellors' views of therapy are often quite different, which in turn creates a cultural mismatch between refugees' traditional worldviews and Western counselling values (Bemak et al., 2003; Bhui & Morgan, 2007). As a result, for refugees in this study, the negotiation of the counselling process necessitated a detailed deconstruction of their cultural knowledge and understanding of psychological well-being within multiple cultural and social contexts (Bhui & Morgan, 2007). Additionally, it required the clients' understanding of the dominant problem narratives, as well as standing with and standing apart from those narratives (Lee, 2013). The initial scepticism about the counselling process pushed refugees in this study to carefully examine cultural differences and subsequently incorporate new cultural meanings into their experiences (Tribe, 2002).

Many researchers emphasize the importance of multicultural counselling competence in refugee counselling (Arthur et al., 2010; Gallardo, 2013; Pedersen, 2002). Collins and Arthur

(2007) noted that the foundation of multicultural competence is visible in counsellor awareness of personal attitudes, while considering the worldviews of other people. This view is consistent with refugees' view of subsequent counselling experiences in this study. While the initial counselling contact was characterized by negative feelings, unfamiliarity, and lack of trust in the counselling process, the subsequent experience created a context within which refugees perceived safety and support, as well as counselling rewards as important stepping stones in their acculturation process. Arthur et al. (2010) pointed out that refugees represent one of the most vulnerable populations in Canada. Although the experiences of refugees in this study may not be observed as extreme, these experiences often interfered with the meaningful adjustment and acculturation in Canada (Djuraskovic & Arthur, 2009). However, when refugees' ability to shift their views of counselling were combined with a welcoming atmosphere in the counselling setting, the outcome was perception of therapy as a constructive process that promotes change and movement towards favourable acculturation outcomes.

Many scholars note the influence of refugees' resettlement experiences on their subsequent adaptation (Arthur & Merali, 2005; Arthur et al., 2010; Volkan, 2004). In this study, counselling became a foundational factor in refugees' acculturation process. Refugees reflected on how counselling allowed them to move towards positive and meaningful adjustment to the new life in Canada, and a unique form of integration into the new culture. The opportunity to experience counselling as a preferred process allowed refugees and their counsellors to negotiate a mutual cultural transformation (Ngo, 2008) where refugees were viewed within their unique cultural contexts (Collins, 2010; Hong et al., 2007), as well as a more general Canadian context. This finding is consistent with the notion that counsellors may be more effective in their work with refugees if they adopt a holistic view of their clients (Singer & Adams, 2011). A more

integrated approach to refugee counselling allows a framework that is culturally-inclusive, with the focus on both individual and collective needs of refugee clients. Baker (2011) proposed an integral approach to counselling refugees emphasizing the four essential perspectives: (a) subjective (i.e., clients' individual experiences), (b) objective (i.e., clients' physical concerns), (c) intersubjective (i.e., shared cultural influences), and (d) interobjective (i.e., larger systemic and environmental influences). Baker noted that refugee clients may experience competing concerns in all fours areas at any time and that the therapeutic success greatly depends on the counsellors' ability to assist clients' in negotiating the novel conditions in any one of the four areas. Baker's approach is consistent with the findings of this study focusing on refugee clients' psychological, historical, social, and cultural contexts, while remaining open to refugee clients' individual experiences. Additionally, the perceived safety and support within the counselling environment including the rewards received influenced refugees' attitudes, motivations, skills, and values (Berry, 2006b; Lee, 2013) necessary to acculturate successfully into the new society. In fact, the favourable counselling environment and the counsellors' openness directly influenced refugees' willingness to integrate in the Canadian culture more readily (Berry, 2001).

Category 2: Counsellor Factors

The themes identified within the category of counsellor factors are consistent with the current literature addressing counsellors' multicultural skills, knowledge, and attitudes (Arthur & Collins, 2010; Sue et al., 1992). Refugees in this study described personal and professional counsellor factors that contributed to their positive perception of counsellors and counselling process. Personal factors included open-mindedness, nurturance, and pseudo-friendship, while professional factors included experience, non-prescriptive attitude, and curiosity. According to the refugees in this study, counsellors' ability to present themselves as genuine human beings

significantly impacted their counselling journey. Counsellors' personal sensitivity, as well as sensitivity towards their clients fostered the acceptance, mutual understanding, and collaborative movement towards change. Such experiences are consistent with culture-infused counselling (Arthur & Collins, 2010a) that emphasizes counsellors' development in the following three areas: (1) personal sensitivity; (2) client sensitivity; and (3) culturally-sensitive counselling skills (Sue et al., 1992).

Many researchers discussed the importance of counsellors developing unique and specific counselling skills when working with refugees (Arthur & Collins, 2010a; Bemak & Chung, 2002; Bemak et al., 2003). Simon (2012) noted that counsellors are most effective in their work when their worldview is congruent with therapeutic approaches they utilize. When such congruence is not present, client treatment "becomes a 'hammer' that turns clients into 'nails'" (p. 4). For the refugees in this study, counsellor personal characteristics carried a special significance. In their reflections, they emphasized the importance of counsellors' personal multiculturalism reflected in their ability to relate to their clients in terms of culture, gender, class, and other factors. Despite the apparent cultural differences, when counsellors identified with refugee clients and engaged in therapeutic discussions as "one human being to another" (Aaron, 2013, p. 150), refugee clients responded positively to counselling.

Counsellors' ability to integrate multiple factors present during counselling allowed them to consider refugees' unique personal experiences (Collins & Arthur, 2010b). Additionally, the idea of mutual cultural teaching and learning seemed to have influenced refugees' counselling process favourably. It reinforced both counsellors' and clients' cultural awareness as significant factors in all stages of counselling (Arthur & Collins, 2010a). This supports a central premise of culture-infused counselling: culture is central in understanding of all human beings (Arthur &

Collins, 2010a). Please note that to the refugees in this study, culture did not only refer to their geographic cultural origin but also to their global understanding of who they are as refugees, women, and human beings.

Within the worldviews of refugees in this study, the multicultural counselling competence represented an integration of counsellors' personal characteristics and professional competence. Counsellors' ability to include their experience and curiosity in the counselling process allowed the refugees in this study to examine their motivations for counselling and engage in a useful goal-setting process. This reinforced the idea that the counsellors' ability to display their own humanness, and treat their clients as human beings while exercising professionalism directly influences refugees' motivation to engage in counselling, engage in development of a strong working alliance, and achieve preferred counselling outcomes. In many ways, this resembles what Collins and Arthur (2010b) defined as culture-infused counselling competence including: (1) the awareness of the influence of culture on personal worldview; (2) awareness of the client's worldview; (3) agreement on counselling goals; and (4) culturally sensitive and socially just working alliance. Additionally, counsellors' ability to relate to their clients in terms of gender significantly impacted refugee clients' understanding of their status, their identities, and overall position in the new culture. Refugee clients in this study experienced validation when the concerns about the meaning of gender, attachment to female counsellors, and overall sense of community were present in therapeutic conversations (Munt, 2011). This is consistent with the current literature pointing out to the importance of recognizing the role that gender and sense of belonging to a particular group play in refugees' mental health (Munt).

Walter and Bala (2004) suggested that how well refugees will adapt to their new lives greatly depends on how well they can engage in the restoration of meaning within their

experiences. For refugees in this study, restoration of meaning was not only dependent on their own motivation and willingness to change, but also on the skills their counsellors possessed. Therefore, when counsellors were perceived to be insightful about their clients' diverse cultural identities and circumstances (Collins, 2010), as well as complexity of clients' experiences (Singer & Adams, 2011), the counselling process was viewed as positive. It was during these times that refugees opened themselves up to the counselling process and embraced what marks the development of a stronger working alliance. Although some scholars emphasize the development of specific multicultural counselling skills (Bemak et al., 2003; Fuertes, Mislowack, & Mintz, 2005; Li, France, & Rodríguez, 2013), refugees in this study placed more importance on counsellors' personal characteristics. Although the recognition of refugees' premigration circumstances was important, overemphasis of the same was not welcomed, and was perceived as contributing to refugees' overall interpretation of distress (Al-Roubaiy et al., 2013). Furthermore, counsellors who were aware and understanding of their clients' social, political, and cultural experiences were perceived as open, genuine, and humane (Al-Roubaiy et al.). Although all refugees elaborated on the importance of counsellors' professional competence within a broader counselling context, it was the counsellors' personal traits that made a difference in how refugees interpreted the therapeutic process.

Category 3: Therapeutic Relationship

Development of the therapeutic relationship became one of the most important counselling factors for refugees in this study. Successful counselling, as perceived by refugee clients, necessitated both refugees and counsellors to remain open to building a strong working alliance, characterized by counsellors' strong sense of ethics, utilization of core therapeutic factors, and acknowledgement of important cultural elements. According to the refugees in this

study, the development of therapeutic relationship was crucial for counselling to become a meaningful culturally-responsive encounter (Yakushko & Chronister, 2005). Refugee clients often feel empowered when they are able to share their experiences with a therapist who is fully present with them (Aaron, 2013; Lee, 2013). In this study, the therapeutic relationship was characterized by mutual understanding, collaborative empathy, and global interchange of ideas that together directed refugee clients towards creation of tangible solutions to their struggles. This finding is consistent with what van der Veer and van Waning (2004) called a safe, empathic, and culturally relevant counselling relationship. Through strong therapeutic relationships with their counsellors, refugee clients in this study were able to invite their narratives of strength and courage to surface and replace the problem-saturated stories that initially brought them to counselling (Lee, 2013).

Refugees in this study emphasized counsellor availability and the role of informed consent as key elements of ethical therapeutic relationship. For many, the counsellors' explanation of what takes place during counselling was a catalyst to their engagement in therapy. Bemak et al. (2003) posited that before counsellors can begin the therapeutic work with refugee clients, they should focus on educating their clients about counselling approaches and interventions. Effective psycho-education often positively influences the development of a strong and trusting therapeutic relationship (Chung, Bemak, & Grabosky, 2011). What was unique about this study was that the more refugees perceived their counselling to be ethical, the more they were willing to implement what they learned in therapy in their daily lives. In other words, counsellors' availability and willingness to accommodate client appointments at different times along with openness to educate their clients about therapy cumulatively created a bridge between clients' experiences in therapy and their abilities to navigate the tasks of daily living.

Refugees in this study took time to reflect on the core therapeutic factors that they deemed to be the most important in their counselling process. These factors included: active listening, validation, and empathy. Yakushko et al. (2008) noted that if counsellors do not take adequate time and do not use appropriate skills to establish a safe and trusting therapeutic relationship, refugee clients would often refrain from disclosing their stories. Gallardo (2013) pointed out that the formation of a strong culturally effective working alliance requires motivation and participation of both counsellors and refugee clients. What was unique to this study; however, was that counsellors' active listening skills fostered the feelings of trust, and opened up the space within which the refugee clients were able to share the most private aspects of their experience. Interestingly, counsellors' willingness to listen to their clients created an atmosphere in which refugee clients became cultural teachers, while counsellors became cultural learners. The adaptation of these roles enabled both refugee clients and counsellors to create a mutual verbal exchange that shaped their cultural understandings. This finding is consistent with the idea that the counsellors' way of being in therapy facilitates the development of a therapeutic relationship and proper utilization of counselling skills and techniques (Fife, Whiting, Bradford, & Davis, 2014).

Counsellors' active listening was also reflected in their ability to ask purposeful questions, at the right time. The combination of attending to their clients' stories while formulating useful questions enabled the refugees in this study to engage in a deeper exploration of their narratives. This parallels the idea that active listening to their clients' stories allows counsellors to "open themselves to the existence of several competing stories about the client's experience" (Duncan, Miller, & Sparks, 2004, p. 53). Listening to clients' narratives enriches the realm of therapeutic relationship and intensifies the clients' healing process (Lee, 2013). In

fact, refugee clients in this study explained how counsellors' listening ability allowed them to open up in a myriad of ways and narrate their experiences with ease. As a result, they were able to realize that several narratives "of survival and courage simultaneously exist" (Duncan et al., 2004, p. 53).

Refugee clients in this study reflected on counsellors' validation and empathy as valuable elements relevant to the overall counselling progress. In many respects, counsellors' ability to validate and empathize with their clients' experiences opened up a corridor for meaningful change to occur. Not only did refugee clients feel safe and supported, but also they experienced acknowledgement of their issues as legitimate and acceptable presenting concerns for counselling. Many scholars discuss validation and empathy as crucial elements of successful counselling (Bemak et al., 2003; Collins & Arthur, 2010b; De Haene et al., 2012; Waldegrave, 2012). When refugee clients in this study experienced validation and empathy, they engaged in the counselling process more readily and gained confidence that they can master their environment and stand up to multiple oppressions they experience (Bemak et al., 2003). The experiences of refugee clients in this study pointed out that refugees likely "prize the same characteristics in therapists that they value in personal relationships" (Fife et al., 2014, p. 24). Therefore, how refugee clients experience the relationship with counsellors significantly impacts the course of counselling.

Collins and Arthur (2010b) argued that the culture-infused working alliance needs to include interactions of trust and respect that are co-created between clients and counsellors. For refugees in this study, such alliances enabled them to challenge the notions of power and disempowerment in both counselling and everyday life contexts. In turn, the clients' presenting concerns were explored more in depth, while multiple oppressions were more frequently

challenged and deconstructed (Hayes, 2008). De Haene et al. (2012) invited counsellors to actively engage in listening to their clients' narratives, respectfully challenging silences, and engaging in collaborative meaning-making process. Such interaction between refugee clients and counsellors fosters collaboration of multiple voices where clients are seen as experts on their experience while counsellors are viewed as professional guides who have the power to influence larger psychological discourse (Waldegrave, 2012). Drisko (2013) hypothesized that effective counsellors, "across diverse cultures and belief systems share many common features" (p. 402). He encouraged counsellors to pay attention to clients' problems, strengths, and supports and acknowledge the impact of the same on the counselling process.

For refugees in this study, cultural influences played a vital role in the development of a strong therapeutic relationship. Although the importance of culture was evident throughout this study, the factors perceived as the most relevant to the development of a culturally relevant therapeutic relationship were counsellors' non-judgmental attitude and cultural sensitivity. When counsellors were perceived as non-judgmental and culturally sensitive, refugee clients became more open to sharing their own cultural heritage, as well as learning and integrating Canadian culture into their lives. This is consistent with what Collins and Arthur (2010b) called a culturally sensitive working alliance. Within their culture-infused counselling model, they propose that a culturally sensitive therapeutic relationship must include: (1) counsellors' understanding of clients' cultural identities; (2) collaboration on counselling-goals; (3) collaboration on counsellor and client tasks; and (4) promotion of social justice. In this study, counsellors' non-judgmental attitudes and cultural sensitivity allowed refugee clients to exercise their freedom to become cultural teachers. When counsellors adopted the cultural learner role, the counselling process became a landscape for collaboratively challenging misunderstandings,

worldviews, stereotypes, and prejudices. The more counsellors learned about their clients' cultural backgrounds, the more they modelled the ways in which clients can engage in contributing to the development of a culturally salient working alliance. The outcome of this client-counsellor collaboration was recognition of not only clients' cultural backgrounds and cultural differences but also of clients' own humanness. This is consistent with what Waldegrave (2012) calls a cultural sense of belonging and collectivism within the counselling relationship. Additionally, equal and non-prescriptive counselling interaction was viewed as empathic, validating, and genuine, which in turn allowed refugee clients to voice their concerns more readily and engage in discussion of systemic issues related to cultural differences (e.g., family, education, occupational status). These findings support the existing literature that emphasizes active listening, privileging the clients' experience, empathy, and strong working alliance as essential cornerstones of successful counselling (Drisko, 2013; Fife et al., 2014; Norcross, 2010).

Refugee clients in this study placed an importance on mutual openness and willingness to engage in discourse with their counsellors about each other's worldviews and cultures. This seemed to have decreased the cultural distance that counsellors and clients often experience as the counselling process evolves. When clients and counsellors engaged in open conversations about the issues that arise in the therapeutic relationship, the therapy shifts away from cultural conflicts towards mutual respect. This finding aligns with Duncan et al. (2004) argument that the purposeful therapeutic conversations lead clients towards creation of new possibilities, and recognizing the therapeutic interaction as an intimate affair focused on clients' change and meaning-making process. Human interaction in counselling requires careful attention and

acknowledgment because it allows counsellors and clients to focus on motivation, achievement of counselling goals, and experience of subsequent healing (Fife et al. 2014).

Category 4: Client Outcomes

Within this study, the client outcomes emerged as an important category. Although refugee clients described their counselling experiences as challenging and, at times, difficult, they still placed significance on continuing to enhance their well-being. Their motivation to feel better and function effectively in the new environment prevailed and was expressed through an emotional catharsis, creation of new meaning, and intense personal change. Within the literature, the notion of client outcomes is closely related to counsellors accepting the clients' theory of change. Duncan et al. (2004) put forward the idea of trusting the clients' intuition and honouring the clients' process. According to them, having faith in clients' abilities to change "is a proactive initiative that requires a focused effort to conduct therapy within the context of the client's unique ideas and circumstances" (p. 146). For refugee clients in this study, such unique ideas and circumstances were captured in emotional catharsis that subsequently led them to the experience of forgiveness and a deeper exploration of their struggles and resulting solutions.

An open exploration of feelings and subsequent experience of forgiveness facilitated the idea that refugee clients are active and effective self-healers (Bohart & Tallman, 2010). Although counsellors served as important catalysts for clients' open expression of feelings and provision of safe and supportive counselling environment, the clients alone are credited with the actual therapeutic change. This is consistent with Bohart and Tallman (2010) position, "it is the client, more so than the therapist or technique, who makes therapy work" (p. 94). With this in mind, the centrality of clients as active self-healers becomes an important factor in the counselling process (Gordon, 2012). Refugee clients in this study actively engaged in

exploration and challenging of the presenting concerns. Thus, they were not passive recipients of counselling but active participants in creating positive change (Bohart & Tallman, 2010).

Evident in this study was refugee clients' motivation to engage in meaning-making process through storytelling and identification of alternative points of view. As refugee clients engaged in the narrative formation of their experiences, they moved away from problem-saturated stories towards narratives that empower their lives and re-connect them with the subjugated parts of self. This is congruent with the counselling process situated around the clients' lived experiences during which both clients and counsellors engage with clients' narratives that represent the extension of their worldviews (Rober & Seltzer, 2010). Gemignani (2011) emphasized that clients' stories can be told and heard from multiple perspectives and as such serve an important purpose in refugee clients' identity expression. Through storytelling, refugee clients paint a picture of their realities, values, and beliefs while at the same time connecting their subjective experiences to larger contexts they are exposed to.

De Haene et al. (2012) proposed a counselling interaction that focuses on the refugees' unique meaning-making process, and facilitates refugees' disclosure of challenging issues.

Drisko (2012) also encourages counselling process that is directed towards the creation of new and alternative meanings. This supports the experiences of refugees in this study focused on intense verbalizations of the most challenging aspects of their experience. Additionally, counsellors' ability to support the storytelling process, understand when and how clients need to narrate their experiences, and showing respect for uniqueness of client stories promotes the culture of healing and recovery (De Haene et al., 2012). It is with courage that refugee clients in this study engaged in self-evaluation and incorporated new information into their existing frameworks. With the help of their counsellors, they recognized the emerging new possibilities

and engaged in therapeutic conversations that subsequently led them to construction of alternative perspectives (De Haene et al., 2012).

The experience of personal change was common to all refugee clients in this study. In order to achieve this change, refugee clients actively engaged in challenging their beliefs about counselling, negotiated client-counsellor boundaries, engaged in development of a therapeutic relationship, experienced emotional catharsis, and re-created their life meaning. The end result of their journey included increased self-confidence, self-advocacy, and internal happiness. This finding is congruent with Waldegrave (2012) who emphasized belonging, sacredness, and liberation as cornerstones of effective culturally diverse counselling. Within this study, refugee clients gained independence and personal freedom through an ongoing cultural integration, navigation of unfamiliar cultural landscapes, and their overall ability to adapt to the new personal understandings. This supports Waldegrave's (2012) notion that clients' cultural identities, humanness, and a sense of freedom, unity, and justice collaboratively promote positive perceptions of counselling and subsequent client change.

In conclusion, refugee clients' personal change did not only refer to change that took place within the counselling context. It also referred to the overall re-negotiation of the existing life scripts and incorporation of the new considerations into the clients' worldviews. Although embracing the newly acquired independence and personal freedom was not an easy task, refugee clients in this study recognized their benefits and, with the assistance of their counsellors, engaged in personal identity expansion and succeeding adaptation to the new life scripts and meanings they developed. For refugees in this study, cultural narratives became essential in meaning-making process. This echoes Munt's (2011) notion that "to retell a story, and through

its repetition to achieve some kind of integrated agentic self, is the intended project of therapeutic intervention" (p. 559).

Implications for Counselling Psychology Practice

The research findings of this heuristic inquiry are important in the provision of culturally responsive counselling to refugees. Although it has increased in recent years, the practice of multicultural therapy with refugees continues to focus on a medical model and psychological issues that refugees face in pre-, trans-, and post-resettlement contexts. However, for refugee counselling to grow and expand, the counselling psychology community needs to continue engaging in an ongoing discourse about complex refugees' presenting concerns and counselling needs as conceptualized from refugees' perspective. The existing literature supports the emphasis on counsellors' development of specific culturally-relevant counselling skills to adequately support refugees as they resettle in Canada and negotiate the new cultural experiences.

The notion of counsellors simply recognizing the importance of considering refugees' common concerns is only a first step in culturally responsive practice. I support the view that culturally-sensitive practice begins with counsellors adopting the integrative lens; moving toward bridging the gaps between theoretical concepts and practice. Viewing refugees' hardships through an integrative lens removes the prescriptive nature of sequential practice, advances beyond traditional conceptualizations of othering, and reveals ethical and social justice implications for professional practice. In promoting an integrative approach to culture-sensitive counselling of refugees, I position the implications for theory and practice within five important areas of practice: (a) the role of common therapeutic factors in refugee counselling, (b) culture-

infused counselling competence, (c) assessment, (d) counsellor training, and (e) promotion of social justice.

The Role of Common Therapeutic Factors in Refugee Counselling

For decades, the medical model, focusing on diagnostic labels and empirically-based counselling approaches have dominated the field of counselling psychology (Duncan et al., 2004; Gordon, 2012). For a long time, counselling psychology operated under the assumptions and practices of the medical model without acknowledging common therapeutic factors and their role in refugee counselling. Although common therapeutic factors have been identified as essential to successful therapy, they are often viewed as simple strategies rather than necessary therapeutic skills (Cutts, 2011). Despite the abundant literature cautioning against such rigid approach, many counsellors still fixate on diagnostic classifications and cringe at the idea of adopting the alternative view to counselling refugees (Duncan et al., 2004). The recent research on refugee counselling in Canada shows a promising movement away from the medical model towards more integrative practice; however, the results of this heuristic study provide new insights into the role of common therapeutic factors in refugee counselling. Most refugee clients perceive initial contact with counselling as complex, challenging, and uncomfortable. While negative experiences represent refugees' discomfort with the new and unfamiliar process, the development of positive views of counselling serve as a catalyst for better adaptation to the new life in the new country. Exploration of refugees' interpretations of counselling at initial and subsequent stages is important; however, considering the context within which these interpretations are created is essential. Consistent with the literature, counsellors often fail to consider the context in which the counselling process evolves. For example, Duncan et al. (2004) noted that counsellors often ignore relationship, environmental, and cultural factors

relevant to the therapeutic process. Counsellors also often struggle to acknowledge their clients as active self-healers and elicit their feedback about what works for them in counselling (Gordon, 2012). However, when counsellors modify their conversational styles to better fit the cross-cultural situations, cultural misunderstandings that arise between counsellors and clients become therapeutic opportunities (Sametband & Strong, 2013). Consequently, counsellors and clients develop shared cultural understandings that make positive therapeutic dialogue possible.

For most refugee clients, the choice of therapeutic approach and/or technique is not very important. Instead, refugee clients place emphasis on the following factors: (1) the counsellor factors (personal and professional); and (2) the therapeutic relationship. In fact, when counsellors' personal and professional characteristics are not in balance, the trust is not built, the counselling process becomes difficult to navigate, and the therapeutic relationship suffers. Arkowitz (1992) and Wampold (2010) noted that the abovementioned common factors have never been considered a dominant force in counselling. Instead, although viewed as intertwined with the rest of the therapeutic process, they cannot be empirically validated and, thus, they are often neglected in the counselling psychology research. However, empirical validation alone cannot determine whether a particular factor is beneficial or not. Therefore, there is no rational argument why the common therapeutic factors should not be viewed as responsible for the client change in therapy (Simon, 2012; Wampold, 2010). In fact, in their most recent study, Fife et al. (2014) offered the idea that common therapeutic factors such as therapeutic relationship and client motivation may be more responsible for client change then it was originally thought. They further proposed a new therapeutic factor – the counsellors' way of being – as a foundational factor to successful counselling.

The findings of this study suggest that the common therapeutic factors perhaps account for the most change that refugee clients experience in counselling. They further point out that if counsellors spend time nurturing these factors, they can adequately assist refugee clients in navigating their individual, familial, social, cultural, and historical contexts. In fact, counsellors' focus on being genuine and open while exercising professionalism and competence directly influences refugee clients' motivation to engage in therapy and achieve preferred counselling outcomes. A review of the common factors literature reveals insights into the importance of common factors in therapeutic settings. Numerous scholars highlight therapists' factors, collaborative working alliance, and client factors as primary elements of the counselling process (Drisko, 2013; Duncan et al. 2004; Fife et al., 2014; Miller, Duncan, & Hubble, 1997; Simon, 2012; Wampold, 2010). These factors become particularly important in refugee counselling because refugee clients typically experience negative feelings related to counselling and take longer time to engage in therapy. In Chapter 2, I discussed several frameworks for counselling refugees. A cumulative review of these frameworks points out to the importance of treating refugee clients' stories as unique and preferred, while tending to cultural empathy and development of a culturally-infused working alliance (Arthur & Collins, 2010a; Bemak & Chung, 2002; Bemak et al., 2003; De Haene et al., 2012; Waldegrave, 2012).

Of particular interest to refugee counselling is development of a safe and strong therapeutic relationship. Refugee clients describe the therapeutic relationship as necessary and preferred factor in their counselling process. Such relationship is collaboratively created between clients and counsellors through a detailed negotiation of ethical boundaries, utilization of core therapeutic skills (i.e., active listening, empathy, and respect), and consideration of both clients' and counsellors' cultural experiences and understandings. The findings of this study

suggest that both counsellors' and clients' contributions to the therapeutic relationship are invaluable, and that the therapeutic outcomes are generally more beneficial when therapeutic relationship is strong (Fife et al., 2014; Gallardo, 2013; Miller et al., 1997; Norcross, 2010). It is vital to note that therapeutic relationship alone cannot account for all of the client change. However, when preferred counsellors' factors are in balance with refugee clients' expectations, the motivation for creating therapeutic relationship is increased, and positive client outcomes are achieved. This is consistent with Baldwin, Wampold, and Imel's (2007) perspective who argue that counsellors who are able to form strong working alliances with clients generally achieve better therapeutic outcomes. Furthermore, when counsellors' ability to form therapeutic relationship is combined with a solid clients' and counsellors' agreement on therapeutic goals and tasks, the counselling process is generally considered to be successful (Norcross, 2010). Additionally, when counsellors' personal worldview is congruent with approaches that inform their treatment, both counsellors and clients experience more satisfaction with counselling (Simon, 2012).

The existing research clearly shows that the common therapeutic factors play a much bigger role in client change than previously considered (Miller et al., 1997). Effective culturally relevant counselling of refugees necessitates a careful consideration of these factors and a movement towards a more unifying language of refugee psychotherapy. This dissertation provides a detailed snapshot of what contributes to successful refugee counselling from a refugee clients' point of view. Focusing on important therapeutic factors outlined in this study, counsellors can assist refugee clients in navigating their concerns effectively, and increasing motivation and hope necessary to achieve preferred therapeutic outcomes (Miller et al., 1997).

Culture-Infused Counselling Competence

The notion of culturally-competent services has been discussed in counselling literature since the early 1970s (Sue et al.,1992). Traditionally, cultural competence has encompassed three core tenets: (a) counsellors' sensitivity to their own attitudes, values, and biases; (b) cultural knowledge and understanding of clients' worldviews; and (c) development of culturally-sensitive skills (Sue et al., 1992). Within the Canadian multicultural context, Collins and Arthur (2010b) developed a definition of culture-infused counselling competence, including:

the integration of attitudes and beliefs, knowledge, and skills essential for awareness of the impact of culture on personal assumptions, values, and beliefs, understanding the worldview of the client, coming to agreement on goals and tasks in the context of a trusting and culturally sensitive working alliance, and reinforcing that alliance by embracing a social justice agenda. (p. 55)

For refugee clients in this study, the initial contact with the counsellor represented not only the uneasiness with therapy but also the overall discomfort with the new culture along with the general confusion with new cultural expectations. Nevertheless, the engagement in counselling also represented a significant shift in refugee clients' thinking patterns, and a passage into the new life in the new country. Thus, the counselling and the counselling relationship represented an acculturative path into a better future. This suggestion is consistent with the definition of culture-infused counselling competence that emphasizes the importance of integration of multiple factors that influence the counselling process. From this perspective, counsellors can effectively assist refugee clients by considering their unique, multifaceted, and personal experiences (Collins & Arthur, 2010b). Adopting a more holistic approach to counselling

refugees allows counsellors more flexibility to effectively deal with complex issues refugee clients present with (Baker, 2011; Singer & Adams, 2011).

As identified in this study, it is important for counsellors to understand and not judge refugee clients' cultural backgrounds and the impact they have on their lives. Additionally, counsellors can facilitate a mutual cultural exchange with clients through the provision of a safe and supportive environment in which refugee clients can narrate their stories within the contexts in which they were formed. This suggestion aligns with the culture-infused counselling that promotes the practitioner awareness of the multiple intrapersonal, interpersonal, and systemic issues that refugee clients face inside and outside the counselling relationship (Chung et al., 2008; Chung et al., 2011). Through the development of a collaborative relationship, both refugee clients and counsellors are challenged to let go of pre-conceived cultural notions and embrace the shared culture of human beings to which all people belong. Such collaboration represents a pillar for effective culturally relevant communication (Faiver, Eisengart & Colonna, 2004), and a landscape where multiple oppressions are challenged (Hays, 2008) in all aspects of counselling including setting, assessment, and counselling interventions (Alderson, 2010).

Assessment

Refugees experience numerous life transitions in the process of resettlement and acculturation in Canada. As they navigate the new environment, refugees require culturally tailored counselling interventions to assist them. These interventions extend beyond the regular counselling process and encompass cultural assessment as an essential therapeutic component that helps counsellors identify multiple influences related to refugees' mental health functioning (Castillo, 1997). The findings of this study identify the cultural assessment as an ongoing process incorporated in all aspects of counselling. Such assessment was evident in counsellors'

attending to the important features of refugee clients' experiences including: resettlement and acculturation challenges, cultural backgrounds and histories, familial and social influences, and personal psychological functioning. Inclusion of such cultural variables into the overall assessment process significantly increases refugees' positive counselling outcomes (Bhui & Morgan, 2007). For refugee clients in this study, resettlement and acculturation concerns contributed to their decision to seek counselling. Although these concerns were not always viewed as primary reasons for seeking counselling help, they were important for counsellors' overall understanding of presenting concerns and subsequent assessment (Kress, Eriksen, Dixon Rayle, & Ford, 2005). Therefore, the consideration of refugee clients' overall experiences while assessing their presenting concerns and counselling needs rested on the premise of preventing miscommunication as a potential working alliance hindrance (Bhui & Morgan, 2007).

It is important to note that the cultural assessment of refugee clients necessitates the acknowledgement of clients' multiple contexts and cultural meanings (Kress et al., 2005). The findings of this study support this notion and demonstrate that both refugee clients and counsellors engage in the assessment of their personal worldviews to identify the meaningful cultural factors relevant to assessment and counselling. Refugee clients in this study reflected on counsellors' openness to discuss, explore and learn about their cultural experiences.

Additionally, having counsellors' facilitate the process during which refugee clients became cultural teachers further opened up an exploration of the following factors: (a) clients' cultural identity and acculturation, (b) sources of relevant cultural information, (c) cultural meanings of clients' struggles, (d) the effects of multiple contexts on clients' functioning, and (d) stigmas related to clients' concerns and counselling (Kress et al., 2005, pp. 100-102).

The findings of this study invite the counsellors to consider the cultural assessment as an important aspect of refugee counselling. Counsellors can significantly improve the cultural assessment process when they consider their clients to be the vital cultural teachers and sources of the relevant cultural knowledge. When counsellors accept their clients as a valid source of cultural information, the assessment process is enhanced, and the outcome is recognition of clients' strengths and resiliencies necessary to achieve a preferred client change (Hays, 2008).

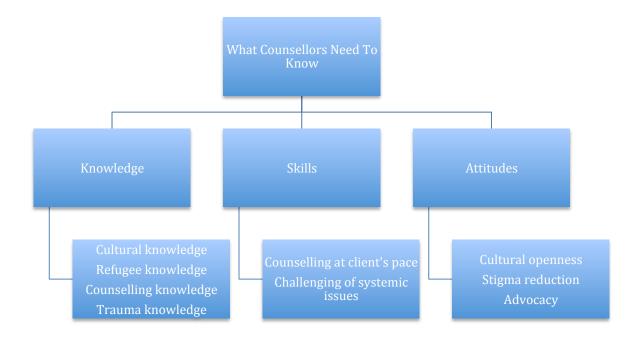
Counsellor Education

Essential to the counselling literature is an ongoing discourse about the importance of culturally relevant counselling for refugees. Collins and Arthur (2010c) noted that "cultural diversity is not a phase; it is a reality of the social fabric of Canadian society and many nations around the world" (p. 455). The counselling profession not only has to move towards integrated practice in counselling settings, but also within larger educational and training contexts. Despite the need to include multicultural counselling courses in graduate counselling programs on a larger scale, the topics of refugee counselling are just beginning to surface. Kuo and Arcuri (2013) noted that although multicultural training programs exist in Canada, "only a limited number of experiential training models occur within the context of trainees providing direct therapy and counselling to therapy clients under supervision in practicum settings" (p. 2). Arredondo, Tovar-Blank, and Parham (2008) invited the movement towards culturallyresponsive practice that begins with training new generations of postgraduate students to expand their knowledge, skills, and awareness of culturally diverse communities. Arredondo et al. (2008) challenged counsellors to stand up to their fears and actively engage in furthering their knowledge foundation when working with immigrants and refugees. This knowledge foundation may include learning about specific culturally relevant strategies but also increasing

understanding of common therapeutic factors and their role in assessment and counselling (Drisko, 2013). Within this invitation, the importance of considering unique concerns of refugees becomes one of the cornerstones of counsellor identity formation. Teaching counsellors to practice from perspectives that promote collaboration, diversity, and clients' uniqueness is a cornerstone of all effective counselling (Drisko, 2013). Additionally, training programs that emphasize seminar learning, encourage community collaboration and partnerships, promote direct development of multicultural competencies, and focus on implementing comprehensive and culturally efficient interventions are necessary to further promote inclusion of culture and social justice in counselling psychology practice (Kuo & Arcuri, 2013).

Unique to this dissertation are recommendations for counsellors' training that come directly from the refugee clients. Like counsellors, refugee clients recognize the importance of developing particular knowledge, skills, and attitudes necessary for counsellors to effectively work with refugees. They offer a unique picture of what they believe counsellors need to know when working with refugees.

Figure 6: What Counsellors Need to Know



As evident in Figure 6, refugee clients emphasize the integration of a broader cultural and refugee knowledge with the counsellors' existing knowledge of therapy. To effectively work with refugees, counsellors should expand their knowledge to include information about diverse cultures that refugee clients come from as well as the knowledge about their own cultures. Additionally, counsellors should learn about refugee populations and various life circumstances they come from to better inform the overall counselling knowledge they posses. Such knowledge should not only include general information about refugees and their cultures, but also the knowledge about trauma experiences that refugees encounter and how they affect overall refugees' mental health.

When counsellors combine specific kinds of knowledge with the skills that refugee clients view as important, they create a landscape of practice within which positive change is possible. The skills refugee clients believe are vital to effective refugee counselling include allowing clients a sufficient time to narrate their stories, while engaging in collaborative

challenging of broader systemic issues. Although these skills may not be identified as legitimate counselling skills in the existing counselling literature, they seem to influence refugee clients' interpretations of counselling. Nevertheless, allowing refugee clients to narrate their stories as they see fit, embracing silences that occur during therapy sessions, and discussing social, economic, systemic, and cultural barriers refugee clients' encounter in their daily lives significantly strengthens the working alliance between counsellors and clients.

When counsellors' knowledge and skills are complimented with particular counsellors' attitudes relevant to counselling, positive therapeutic outcomes are enhanced. Refugee clients view cultural openness, stigma reduction, and advocacy as attitudes that counsellors should posses in order to address refugee concerns effectively. These attitudes assist both counsellors and clients in becoming more culturally open and not susceptible to societal stigma, while effectively challenging dominant cultural discourse both inside and outside of the therapeutic setting. Such challenging is further supported with counsellors' advocacy on their clients' behalf and it represents another stepping stone towards integrated multicultural counselling practice. Refugee clients often perceive counsellors openness to advocate on their behalf as a supportive attitude that in turn allows them to engage in self-advocacy and challenge multiple oppressions they experience more readily.

While most graduate programs include a multicultural counselling class in their curriculum to meet the ethical standards for training and practice, the overall landscape of counsellor education and training does not reflect the integrative nature of inclusive pedagogy. Graduate counselling programs are challenged to infuse culture in all aspects of counsellor education and training. Collins and Arthur (2010c) noted that students and counsellors alike express a desire to learn how to effectively address the needs of the growing culturally diverse

Canadian society. They call upon counsellors to engage in a philosophical transformation of traditional views, and recognize multifaceted complexity of culturally diverse individuals, while strengthening their knowledge base to effectively challenge the societal frameworks of power and privilege. The findings of this study support such agenda and invite counsellors to reflect their work in the current changes and expansion of psychological roles (Lichtenberg et al., 2008).

Promotion of Social Justice

The openness of resettling countries has been shown to have a significant impact on the overall well-being of refugees and immigrants (Chung et al., 2008; Chung et al., 2011). Despite Canada introducing the multicultural agenda into its policies and regulations, many refugees and immigrants continue to experience multiple oppressions on personal, social, and institutional levels (Arthur et al., 2010). These multiple oppressions have been shown to negatively impact their adaptation to the new culture and seriously undermine human rights (Chung et al., 2008; Chung et al., 2011). The counselling profession has been challenged to identify and confront discriminatory and oppressive practices and extend its position to include a firm social justice agenda (Arthur et al., 2009; Constantine et al., 2007; Kenny & Romano, 2009; Nilsson, Schale, Khamphakdy-Brown, 2011). Within the experiences of refugee clients in this study, there were numerous accounts of perceived oppressions that occur both in the counselling setting and outside of the therapy walls. The results of this study bear certain social justice and policy implications related to refugee mental health and adaptation issues in Canada. More specifically, multiple issues identified regarding the refugees' lack of access to counselling services in Canada represent glaring issues that significantly impact refugees' willingness, attitudes, and motivation to engage in help-seeking behaviours. In order for refugees to receive effective counselling services, counselling psychology has to adopt the attitude that promotes larger social

change (Vera & Speight, 2003). Arthur and Collins (2010b) suggested that counsellors need to be skilled in identifying what counselling roles best serve the needs of their clients, as well as develop competencies that will impact larger social justice agenda. Within these suggestions, counsellors should understand multiple meanings of social justice and how they can use these meanings to assist refugees in accessing counselling services more readily (Arthur & Collins, 2010b). According to Vera and Speight (2003), social justice invites counsellors to engage advocacy-related behaviours both at individual and societal level, as well as creation of equal counselling opportunities for all clients. Refugee clients may struggle with recognizing multiple oppressions openly and may require counsellors' help to advocate on their behalf. Thus, counsellors are encouraged to expand their professional roles to include active advocacy, client empowerment, and strategies aimed at reducing and subsequently eliminating multiple obstacles that refugees face (Arthur & Collins, 2010c; Arthur et al., 2010; Chung et al., 2008; Chung et al., 2011).

Refugee clients in this study reflected on client empowerment and noted that whenever their counsellors empowered them to tell their stories and share their cultural understandings openly, they felt included in the culture of human beings. This in turn created an atmosphere conducive to preferred acculturation and resettlement within which refugee clients were able to navigate external environment with more skills and confidence. This is consistent with multicultural counselling agenda in Canada that created a shift in regards to how clients' issues are addressed and what counsellors' roles best serve the needs of culturally diverse society (Arthur & Collins, 2010c). Arthur and Collins (2010b) noted that social justice work is closely related to client empowerment. For refugee clients, availability, promotion of confidentiality, absence of judgement, and equal treatment represent a form of social justice that they initially

did not expect from their counsellors. Through access to counsellors who served as positive models, refugees' self-advocacy skills were promoted through deeper engagement in counselling, and subsequent achievement of counselling goals. Continuous efforts to positively impact clients' well-being, recognize diverse experiences, and engage in transformative activities that promote social justice enables counsellors to co-create meaningful changes in the lives of clients they serve (Arthur & Collins, 2010b). Helms (2003) further invited counsellors to identify multiple barriers to social justice and integrate the social justice agenda with their professional roles. Thus, in order to serve the needs of refugee clients effectively, counsellors are encouraged to use strategies that will positively influence a fair distribution of power within counselling psychology practice. Unfortunately, a critical lens on the condition of social justice in Canada shows that "the greatest barrier may not lie with external funders or persons who hold the power in administering mental health services; rather, the commitment to a social justice agenda within counsellors education may be one of the largest barriers to overcome" (Arthur & Collins, 2010b, p. 155). Thus, the invitation to counsellors to support social justice as a valid component of counselling must be supported through counsellor education and subsequent counsellor practices. From this position, inclusion of social justice and advocacy practices can support the integration of the same into the practice of counselling psychology (Vera & Speight, 2003).

Delimitations of this Research Study

The strengths of this heuristic inquiry are reflected in its potential contribution to the scarce research about refugees and refugee counselling. However, it is important to note several delimitations that could have potentially impacted the outcome of this study. I situated the discussion in this section according to the following limitations: (a) sample issues, (b)

researcher's reflexivity, (c) representation of researcher's experience, and (d) diversity issues. Each is discussed below.

Sample Issues

In all qualitative research, the debate exists about how many participants is enough to conduct a research study. While arguments exist about what constitutes too small or too large sample size, Creswell (2013) pointed out that the general guideline in conducting a qualitative study is choosing a sample from which rich details about the phenomenon in question can be collected. Within the context of this study, 6 co-researchers represented a sufficient number to achieve the saturation of themes comfortably. Additionally, the researcher's experiences of the phenomenon were included in all aspects of this heuristic inquiry.

While it could be argued that 6 co-researchers represent a small sample size, one should note the nature of the population being studied. The focus of this heuristic inquiry was refugees and their experiences of counselling. Refugees typically underutilize services available to them and express ambivalence towards counselling (Bemak & Chung, 2008a). I take it upon myself to expand this notion and state that refugees are likely reluctant to participate in research, especially when such research is focused on collecting information about their private experiences. I suspect that refugees who agree to partake in research may feel more comfortable disclosing their experiences. Thus, they are more likely to come forward and participate in research. Due to the time constraints, obtaining a larger sample for this study was not possible. Nevertheless, the saturation of themes was achieved.

Creswell (2013) noted that although qualitative research is not concerned with generalizability of results, the researchers should aim to obtain enough participants in order to transfer the findings outside of the research sample. On the contrary, Moustakas (1990) noted

that the goal of heuristic inquiry is not to generalize the results to the whole population but to paint a rich picture of the phenomenon that is being studied. In accordance with Moustakas (1990), the purpose of this heuristic inquiry was not to generalize the results but to explore refugees' experiences of counselling and co-create a rich narrative of our journey. As such, the research findings from this study are likely only relevant to 6 co-researchers who volunteered their time to participate in this study. The readers are cautioned to interpret the research findings as suggestions and not attempt to generalize them to the entire refugee population. Additionally, the co-researchers' gender, educational status, and openness to discuss their counselling experiences might have impacted the research findings. With this in mind, I assume that their experiences may not correspond to the experiences of refugees from diverse life circumstances.

Researcher's Reflexivity

When conducting heuristics research, researchers are invited to be mindful of the particular challenges associated with reflexivity. Finlay (2002) noted that in heuristic research, reflexive practice may turn into researchers' fixation on the phenomenon that is being studied. I note that I have had an extensive experience as a refugee in counselling. Thus, my values, beliefs, reflections and attitudes about refugee counselling might have influenced the results of this study. While I included co-researchers in all aspects of this study and invited them to reflect on the narratives I was writing, it is possible that the final depiction may be perceived as only my personal reflection. To reduce the possible bias, I engaged in extensive exploration of my own reflexivity and I continuously examined whose voices in this research were given primacy, while carefully focusing on not intentionally and/or unintentionally extinguishing co-researchers' accounts of their experiences. Additionally, I made steps to ensure that the readers understand

the nature of heuristic inquiry and that my conclusions are impacted by personal knowledge and meaning (Moustakas, 1990).

Representation of Researchers' Experiences

Heuristic inquiry requires a strict structure, careful collection of data, and detailed analysis (Frick, 1990; Moustakas, 1990). As such, heuristic inquiry cannot be hurried and it must follow its own course to the point of natural closing (Moustakas, 2001; Moustakas & Moustakas, 2004). Before I began this research, I was fully aware of my experience of counselling and potential challenges that it may bring. Although I was able to positively reflect on it, I also experienced negative feelings, self-doubts, and embarrassing memories (Ellis, 1999). At times, I felt overwhelmed, overextended in the process, and ready to terminate my research prematurely. Although I took steps to engage in self-care, step away from data analysis when needed, and carefully review all of the information that the co-researchers presented, it should be noted that in the process I might have unintentionally ignored and/or dismissed some of the important insights and only reflected on them superficially.

Some may argue that my participation in this study and the disclosure of my own experience might have negatively impacted its outcomes. While I recognize that my personal experiences might have created certain expectations regarding the research findings, I argue that without my intense experience I would have not been able to identify the significant gaps in the literature and directions for future research. I situate myself in a research paradigm where my co-researchers and I offered our own versions of reality related to our experience of counselling. With that I believe I described an interpretive research process through which each one of us made a unique sense of our journey (Nuttall, 2006; Smith & Osborn, 2003).

Diversity Issues

Within this research study, I placed an emphasis on co-researchers' cultural diversity. Coresearchers in this study identified themselves as refugees from Yemen, Romania, Bosnia, and
Croatia. Although such sample of co-researchers could be viewed as sufficiently culturally
diverse, it should be noted that a broader sample of culturally diverse refugees would have
produced deeper refugees' experiences of counselling in Canada. Additionally, it should be
noted that all co-researchers in this study were women. Their narratives included not only
experiences of counselling but also perceptions of what it means to be women in both their
countries of origin and Canada. Broadening the sample to include refugee men who experienced
counselling in Canada might have resulted in different narratives. Lastly, all co-researchers in
this study disclosed positive experiences in counselling. Future research focusing on refugee
men and women who have had differing experiences of counselling in Canada may assist in
furthering the understanding of refugee counselling in Canada.

Suggestions for Future Research

Refugee counselling in Canada continues to represent the area of counselling psychology that is understudied and often neglected. In an attempt to reflect on the existing refugee counselling in Canada and promote the expansion of refugee counselling discourse, I recommend the following five steps for future research.

First, future research needs to expand the current understanding of refugee counselling in Canada. For example, focusing on refugees' gender differences, diverse cultural experiences, age, and diverse life circumstances and how they influence their view of counselling may validate or extend beyond the refugees' experiences recorded in this study.

Second, exploring the role of common therapeutic factors and how they relate to refugee counselling in Canada is vital. For instance, focusing on the relationship between counsellors' characteristics, therapeutic relationship, and refugees' motivation and openness to engage in counselling may provide new insights about how counsellors can assist refugees in achieving preferred therapeutic outcomes. Additionally, exploring how common therapeutic factors can be emphasized in refugee counselling may assist counsellors in reducing the stigma surrounding counselling and provision of social justice in all aspects of therapy.

Third, exploring refugees' experiences of counselling from their own perspective is pivotal in moving the existing research forward. The current research on refugee counselling places extensive emphasis on the nature of refugees' presenting concerns, psychopathology, and medical orientation to treatment. Examining the gaps in current approaches to counselling refugees, and focusing on the steps to foster refugees' strengths, resiliencies, hopes, and motivation may assist counsellors in provision of effective culturally relevant counselling.

Fourth, the experiences of refugees in this study point to counselling as being a catalyst for successful resettlement and acculturation into the Canadian society. Exploring further how counselling assists refugees in their acculturation process and overall adaptation may provide important insights about how to support refugees when they first arrive in Canada.

Fifth, reflecting on the limitations of this study in terms of generalizability of data points out to the need of conducting evidence-based research with a larger sample size. Exploring whether refugees' experiences of counselling recorded in this study are transferable to a larger refugee population may assist counsellors in creating refugee-affirmative counselling approaches.

Conclusion

In this dissertation, I asked the question, "What is the experience of counselling for refugees?" The exploration of this question led to amazing conversations about refugees' counselling experiences that took place with 6 refugee women in Calgary. In this dissertation, I provided an introduction to the topic of refugees, refugees' common presenting concerns, and refugee counselling. I discussed the potential significance of the study, theoretical importance, social implications, and personal reflections. I also provided a detailed literature review exploring multiple historical, social, cultural, and political contexts that impact refugees and refugee counselling. I offered a detailed overview of the research methodology and design. Lastly, I presented co-researchers' narratives of their counselling experiences, detailed description of research findings, and potential contributions to the current counselling psychology literature and professional practice.

At the first glance, it appears that my research findings did not create significant new knowledge about refugees and refugee counselling. However, a careful reflection on the results of this study tells a different story. The results of this study identified important aspects of refugee counselling process as it evolves over time. More specifically, personal and professional counsellor characteristics along with the development of a strong and culturally friendly working alliance positively influence refugee clients' counselling outcomes. As such, these factors expand the landscape of multicultural counselling and remind the counsellors about the importance of including the common therapeutic factors more readily in the clinical practice. In particular, a strong therapeutic relationship between counsellors and refugee clients creates a space for refugee clients to engage in counselling more readily, increase their motivation towards change, and apply the therapeutic knowledge in their daily lives. The results of this study

without a doubt show that although sometimes neglected in the clinical practice, common therapeutic factors are key elements of effective refugee counselling. From them, effective counselling strategies can be collaboratively developed between counsellors and refugee clients, and a greater therapeutic change can be achieved.

It is with great excitement that I bring this dissertation to an end. Although I am happy to complete my studies and move on, I cannot help but notice that the words written in this dissertation have been a part of me for some time now. I can only hope that they will trigger more academic and professional discussions and contribute towards culturally effective counselling research and practice regarding refugees.

References

- Aaron, C. (2013). The sounds of silence: Discussion on "The need for cushions: Trauma and resilience in the life of a refugee," by Margaret Green. *International Journal of Psychoanalytic Self-Psychology*, 8, 145-153. doi: 10.1080/15551024.2013.768753
- Alcock, M. (2003). Refugee trauma-the assault on meaning. *Psychodynamic Practice*, *9*, 291-306. doi: 10.1080/1353333031000139255
- Alderson, K. G. (1998). *The experience of building a positive gay identity* (Unpublished doctoral dissertation). University of Alberta, Edmonton, Alberta, Canada.
- Alderson, K. (2010). From madness to mainstream: Working with gay men today. In N. Arthur, & S. Collins (Eds.), *Culture-infused counselling* (2nd ed., pp. 395-422). Calgary, AB: Counselling Concepts.
- Allen, J., Vaage, A., & Hauff, E. (2006). Refugees and asylum seekers in societies. In D. L. Sam,
 & J. W. Berry (Eds.), The Cambridge handbook of acculturation psychology (pp. 198-217). New York: Cambridge University Press.
- Al-Roubaiy, N. S., Own-Pugh, V., & Wheeler, S. (2013). The experience of exile-related stress among Iraqi refugee men in Sweden and its implications for counseling and psychotherapy: A qualitative study. *Counselling Psychology Review*, 28, 53-67.
- Anderson, R. (2000). Intuitive inquiry: Interpreting objective and subjective data. *ReVision*, 22, 31-39.
- Anderson, A., Hamilton, R., Moore, D., Loewen, S., & Frater-Mathieson, K. (2004). Education of refugee children: Theoretical perspectives and best practice. In R. Hamilton, & D. Moore (Eds.), *Educational interventions for refugees children: Theoretical perspectives and implementing best practices* (pp. 1-11). New York: Routledge.

- Arredondo, P., Tovar-Blank, Z. G., & Parham, T. A. (2008). Challenges and promises of becoming a culturally competent counselor in sociopolitical era of change and empowerment. *Journal of Counseling & Development, 86,* 261-268. doi: 10.1002/j.1556-6678.2008.tb00508.x
- Arkowitz, H. (1992). Integrative theories of therapy. In D. K. Freedheim (Ed.), *History of psychotherapy: A century of change* (pp. 261-303). Washington DC: American Psychological Association.
- Aroche, J. & Coello, M. J. (2004). Ethnocultural considerations in the treatment of refugees and asylum seekers. In J. P. Wilson & B. Drožđek (Eds.), *Broken spirits: The treatment of traumatized asylum seekers, refugees, war and torture victims* (pp. 53-80). New York: Brunner-Routledge.
- Arthur, N. & Collins, S. (2010a). Introduction to culture-infused counselling. In N. Arthur & S. Collins (Eds.), *Culture-infused counselling* (2nd ed., pp. 3-25). Calgary, AB: Counselling Concepts.
- Arthur, N. & Collins, S. (2010b). Social justice and culture-infused counselling. In N. Arthur & S. Collins (Eds.), *Culture-infused counselling* (2nd ed., pp. 139-164). Calgary, AB; Counselling Concepts.
- Arthur, N. & Collins, S. (2010c). Rationale for culture-infused counselling. In N. Arthur & S. Collins (Eds.), *Culture-infused counselling* (2nd ed., pp. 27-44). Calgary, AB: Counselling Concepts.
- Arthur, N., Collins, S., McMahon, M., & Marshall, C. (2009). Career practitioners' views of social justice and barriers for practice. *Canadian Journal of Career Development*, 8, 22-31.

- Arthur, N. & Merali, N. (2005). Counselling immigrants and refugees. In N. Arthur & S. Collins (Eds.), *Culture-infused counselling: Celebrating the Canadian mosaic* (1st ed., pp. 331-360). Calgary, AB: Counselling Concepts.
- Arthur, N., Merali, N., & Djuraskovic, I. (2010). Facilitating the journey between cultures:

 Counselling immigrants and refugees. In N. Arthur & S. Collins (Eds.), *Culture-infused counselling* (2nd ed., pp. 285-314). Calgary, AB: Counselling Concepts.
- Arthur, N., & Ramaliu, A. (2000). Crisis intervention with survivors of torture. *Crisis Intervention*, 6, 51-63. doi: 10.1080/10645130008951296
- Atkinson, D. R., Morten, G., & Sue, D. W. (1989). Counseling American minorities: A cross-cultural perspective. Dubuque, IA: Wm. C. Brown.
- Bala, J. (2005). Beyond personal pain: Integrating social and political concerns of refugees. In D.Ingleby (Ed.), Forced migration and mental health rethinking the care of refugees and displaced persons (pp.169-182). New York: Springer.
- Baldwin, S. A., Wampold, B. E., & Imel, Z. E. (2007). Untangling the alliance-outcome correlation: Exploring the relative importance of therapist and patient variability in the alliance. *Journal of Consulting and Clinical Psychology*, 75, 842-852. doi: 10.1037/0022-006X.75.6.842
- Baker, M. (2011). An integral approach to counselling refugees. *Asia Pacific Journal of Counselling and Psychotherapy*, 2, 117-125. doi: 10.1080/21507686.2011.565932
- Bemak, F. & Chung, R. C. (2002). Counseling and psychotherapy with refugees. In P. B.Pedersen, J. G. Draguns, W. J. Lonner, & J. E. Trimble (Eds.), *Counseling across cultures* (5th ed., pp. 209-232). Thousand Oaks, CA: Sage.

- Bemak, F. & Chung R. C. Y. (2008a). Counseling refugees and migrants. In P. B. Pedersen, J. G. Draguns, W. J. Lonner, & E. J. Trimble (Eds.), *Counseling across cultures* (6th ed., pp. 307-324). Thousand Oaks, CA: Sage.
- Bemak, F., & Chung, R. C. Y. (2008b). New professional roles and advocacy strategies for school counselors: A multicultural/social justice perspective to move beyond the nice counselor syndrome. *Journal of Counseling & Development, 86,* 372-381. doi: 10.1002/j.1556-6678.2008.tb00522.x
- Bemak, F., Chung, R. C. Y., & Bornemann, T. H. (1996). Counseling and psychotherapy with refugees. In P. B. Pedersen, J. G. Draguns, W. J. Lonner, & J. E. Trimble (Eds.), *Counseling across cultures* (4th ed., pp. 207=231). Thousand Oaks: Sage.
- Bemak, F., Chung, R. C. Y., & Pedersen, P. B. (2003). *Counseling refugees: A psychosocial approach to innovative multicultural interventions*. Westport, CT: Greenwood Press.
- Berry, J. W. (1997). Immigration, acculturation, and adaptation. *Applied Psychology: An International Review*, 46, 5-68. doi:10.1111/j.1464-0597.1997.tb01087
- Berry, J. W. (2001). Psychology of immigration. *Journal of Social Issues*, *57*, 615-631. doi: 10.1111/0022-4537.00231
- Berry, J. W. (2005). Acculturation: Living successfully in two cultures. *International Journal of Intercultural Relations*, 29, 697-712. doi:10.1016/j.ijintrel.2005.07.013
- Berry, J. W. (2006a). Stress perspectives on acculturation. In D. L. Sam, & J. W. Berry (Eds.), *The Cambridge handbook of acculturation psychology* (pp. 43-57). New York: The Cambridge University Press.

- Berry, J. W. (2006b). Contexts of acculturation. In D. L. Sam, & J. W. Berry (Eds.), *The Cambridge handbook of acculturation psychology* (pp. 27-42). New York: The Cambridge University Press.
- Bhui, K. & Morgan, N. (2007). Effective psychotherapy in a racially and culturally diverse society. *Advances in Psychiatric Treatments*, *13*, 187-193. doi:10.1192/apt.bp.106.002295
- Birkett, D. (2006). Cultural dynamics in counselling refugees. *Healthcare Counselling & Psychotherapy Journal*, *6*, 18-21. Retrieved from: http://web.ebscohost.com.ezproxy.lib.ucalgary.ca
- Bohart, A. C., & Tallman, K. (2010). Clients: The neglected common factor in psychotherapy. In B. L. Duncan, S. D. Miller, B. E. Wampold, & M. A. Hubble (Eds.), *The heart and soul of change: Delivering what works in therapy* (2nd ed., pp. 83-111). Washington DC: American Psychological Association.
- Boyd, M. (1989). Family as personal networks in international migration: Recent development and new agendas. *International Migration Review*, *23*, 638-670.
- Boyd, E. M., & Fales, A. W. (1983). Reflective learning: Key to learning from experience. *Journal of Humanistic Psychology*, 23, 99-117. doi: 10.1177/0022167883232011
- Braud, W., & Anderson, R. (1998). *Transpersonal research methods for social sciences:*Honouring human experience. London: Sage.
- Bridgman, P. (1950). *Reflections of a physicist*. New York: Philosophical Library.
- Briere, J., & Scott, C. (2006). *Principles of trauma therapy: A guide to symptoms, evaluation, a and treatment.* Thousand Oaks, CA: Sage.

- Brown, C., & Augusta-Scott, T. (2007). Introduction: Postmodernism, reflexivity, and narrative therapy. In C. Brown & T. Augusta-Scott (Eds.), *Narrative therapy: Making meaning, making lives* (pp. ix-kliii). Thousand Oaks, CA: Sage.
- Castillo, R. J. (1997). *Culture and mental illness: A client centered approach*. Pacific grove, CA: Brooks Cole.
- Century, G., Leavey, G., & Payne, H. (2007). The experience of working with refugees:

 Counsellors in primary care. *British Journal of Guidance & Counselling, 35*, 23-40.

 doi:10.1080/03069880601106765
- Chung, R. C. Y., & Bemak, F. (2002). The relationship of culture and empathy in cross-cultural counselling. *Journal of Counseling & Development*, 80, 154-159. doi: 10.1002/j.1556-6678.2002.tb00178.x
- Chung, R. C. Y., Bemak, F., & Grabosky, T. K. (2011). Multicultural-social justice leadership strategies: Counseling and advocacy with immigrants. *Jonal for Social Action in Counseling and Psychology, 3,* 86-102.
- Chung, R. C., Bemak, F., Ortiz, D. P., & Sandoval-Perez, P. A. (2008). Promoting the mental health of immigrants: A multicultural/social justice perspective. *Journal of Counseling and Development*, 86, 310-317. doi: 10.1002/j.1556-6678.2008.tb00514.x
- Citizenship and Immigration Canada (2010). Canada celebrates World Refugee Day. Ottawa: Government of Canada. Retrieved from:

http://www.cic.gc.ca/English/department/media/releases/2010/2010-06-18.asp#tphp

Citizenship and Immigration Canada (2013). *The refugee system in Canada*. Ottawa: Government of Canada. Retrieved from:

http://www.cic.gc.ca/english/refugees/canada.asp

- Coelho, P. (2011). Aleph. New York: Vintage International.
- Colaizzi, P. F. (1978). Psychological research as the phenomenological views it. In R. S. Valle, & M. King (Eds.), *Existential-phenomenological alternatives for psychology* (pp. 48-71). New York: Oxford Press.
- Collins, S. (2010). The complexity of identity: Appreciating multiplicity and intersectionality. InN. Arthur, & S. Collins (Eds.), *Culture-infused counselling* (2nd ed., pp. 247-258).Calgary, AB: Counselling Concepts.
- Collins, S. & Arthur, N. (2007). A framework for enhancing multicultural counselling competence. *Canadian Journal of Counselling*, *41*, 31-49. Retrieved from: http://proquest.umi.com.ezproxy.lib.ucalgary.ca
- Collins, S. & Arthur, N. (2010a). Self-awareness and awareness of client cultural identities. In N. Arthur, & S. Collins (Eds.), *Culture-infused counselling* (2nd ed., pp. 67-102). Calgary, AB: Counselling Concepts.
- Collins, S. & Arthur, N. (2010b). Culture-infused framework: A framework for multicultural competence. In N. Arthur & S. Collins (Eds.), *Culture-infused counselling* (2nd ed., pp. 45-65). Calgary, AB: Counselling Concepts.
- Constantine, M. G., Hage, S. M., Kindaichi, M. M., & Bryant, R. M. (2007). Social justice and multicultural issues: Implications for the practice and training of counselors and counseling psychologists. *Journal of Counseling & Development*, 85, 24-29. doi: 10.1002/j.1556-6678.2007.tb00440.x
- Craig, D. C., Sossou, M., Schank, M., & Essex, H. (2008). Complicated grief and its relationship to mental health and well-being among Bosnian refugees after resettlement in the United

- States: Implications for practice, policy, and research. *Traumatology, 14,* 103-115. doi:10.1177/1534765608322129
- Creswell, J. W. (2013). *Qualitative inquiry & research design: Choosing among five approaches* (3rd ed.). Los Angeles, CA: Sage.
- Cross, W. E. (1995). The psychology of nigrescence: Revising the Cross model. In J. G. Ponterotto, J. M. Casas, L. A. Suzuki, & C. M. Alexander (Eds.), *Handbook of multicultural counseling* (pp. 93-122). Thousand Oaks, CA: Sage.
- Cutts, L. (2011). Integration in counselling psychology: To what purpose? *Counselling Psychology review*, *26*, 38-48.
- Da Haene, L., Rober, P., Adriaenssens, P., & Verschueren, K. (2012). Voices of dialogue and directivity in family therapy with refugees: Evolving ideas about dialogical refugee care. *Family Process*, *51*, 391-404. doi: 10.1111/j.1545-5300.2012.01404.x
- Davidson, G. R., Murray, K. E.,, Schweitzer, R. (2008). Review of refugee mental health and wellbeing: Australian perspectives. *Australian Psychologist*, *43*, 160-174. doi:10.1080/00050060802163041
- Denzin, N. K., & Lincoln, Y. S. (2005). Introduction: The discipline and practice of qualitative research. In N. K. Denzin & Y. S. Lincoln (Eds.), *The Sage handbook of qualitative research* (3rd ed., pp.1-41). Thousand Oaks, CA: Sage.
- Dhall, S. (2007). An award-winning resource for refugees. *Healthcare Counselling & Psychotherapy Journal*, 7, 36-39. Retrieved from: http://web.ebscohost.com.ezproxy.lib.ucalgary.ca

- Djuraskovic, I., & Arthur, N. (2009). The acculturation of former Yugoslavian refugees.

 *Canadian Journal of Counselling, 43, 18-34. Retrieved from:

 http://proquest.umi.com.ezproxy.lib.ucalgary.ca
- Djuraskovic I., & Arthur, N. (2010). Heuristic inquiry: A personal journey of acculturation and identity reconstruction. *The Qualitative Report*, *15*, 1569-1593.
- Donelly, T. T., Hwang, J. J., Este, D., Ewashen, C., Adair, C., & Clinton, M. (2011). If I was going to kill myself, I wouldn't be calling you. I am asking for help: Challenges influencing immigrant and refugee women's mental health. *Issues in Mental Health Nursing*, 32, 279-290. doi: 10.3109/01612840.2010.550383
- Douglass, B. G., & Moustakas, C. (1985). Heuristic inquiry: The internal search to know. *Journal of Humanistic Psychology, 25,* 39-55. doi: 10.1177/0022167885253004
- Drisko, J. (2013). The common factors model: Its place in clinical practice and research. *Smith College Studies in Social Work*, 83, 398-413. doi: 10.1080/00377317.2013.833435
- Duncan, B. L., Miller, S. D., & Sparks, J. A. (2004). The heroic client: A revolutionary way to improve effectiveness through client-directed, outcome informed therapy (Rev. ed.). San Francisco: Jossey-Bass.
- Ehntolt, K. A., & Jule, W. (2006). Practitioner review: Assessment and treatment of refugee children and adolescents who have experienced war-related trauma. *Journal of Child Psychology and Psychiatry*, 47, 1197-1210. doi: 10.1111/j.1469-7610.2006.01638.x
- Eisehbruch, 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. Retrieved from http://web.ebscohost.com.ezproxy.lib.ucalgary.ca

- Eleftheriadou, Z. (1999). Assessing the counselling needs of the ethnic minorities in Britain. In S. Palmer & P. Laungani (Eds.), *Counseling in a multicultural society* (pp. 113-132). Thousand Oaks, CA: Sage.
- Ellis, C. (1999). Heartful autoethnography. *Qualitative Health Research*, *5*, 669-683. doi: 10.1177/104973299129122153
- Erwin, E. (1999). Constructivist epistemologies and therapies. *British Journal of Guidance & Counselling*, 27, 353-365. doi: 10.1080/03069889908256276
- Escobar, J. I., Nervi, C. H., & Gara, M. A. (2000). Immigration and mental health: Mexican

 Americans in the United States. *Harvard Review of Psychiatry*, *8*, 64-72. Retrieved from: http://informahealthcare.com.ezproxy.lib.ucalgary.ca/doi/pdf/10.1080/hrp 8.2.64
- Etherington, K. (2001a). Writing qualitative research a gathering of selves. *Counselling and Psychotherapy Research*, 1, 119-125. doi: 10.1080/14733140112331385158
- Etherington, K. (2004a). Research methods: Reflexivities roots, meanings, dilemmas.

 *Counselling and Psychotherapy Research, 4, 46-47. doi: 10.1080/14733140412331383963
- Everly, G. S., & Lating, J. M. (2004). Neuropsychological assessment and posttraumatic stress. In G. S. Everly & J. M. Lating (Eds.), *Personality-guided therapy for posttraumatic stress disorder* (pp. 89-99). Washington DC: American Psychological Association.
- Faiver, C., Eisengart, S., & Colonna, R. (2004). *The counselor intern's handbook* (3rd ed.). Belmont, CA: Brooks/Cole.
- Fife, S. T., Whiting, J. B., Bradford, K., & Davis, S. (2014). The therapeutic pyramid: A common factors synthesis of techniques, alliance, and way of being. *Journal of Marital and Family Therapy*, 40, 20-33. doi: 10.1111/jmft.12041

- Finlay, L. (2002). Negotiating the swamp: the opportunity and challenge of reflexivity in research practice. *Qualitative Research*, *2*, 209-230. doi: 10.1177/146879410200200205
- Frick, W. B. (1990). The symbolic growth experience: A chronicle of heuristic inquiry and a quest for synthesis. *Journal of Humanistic Psychology*, *30*, 64-80. doi: 10.1177/0022167890301004
- Fuertes, J. N., Mislowack, A., & Mintz, S. (2005). Multicultural competencies in clinic and hospital settings. In M. G. Constantine, & D. W. Sue (Eds.), *Strategies for building multicultural competence in mental health and educational settings* (pp. 145-159).
 Hoboken, NJ: John Wiley & Sons.
- Gallardo, M. E. (2013). Context and culture: The initial clinical interview with the Latino/a client. *Journal of Contemporary Psychotherapy*, *43*, 43-52. doi: 10.1007/s10879-012-9222-8
- Gemignani, M. (2011). The past if past: The use of memories and self-healing narratives in refugees from the former Yugoslavia. *Journal of Refugee Studies*, *24*, 132-156. doi: 10.1093/jrs/feq050
- Gergen, K. J. (2001). Psychological science in a postmodern context. *American Psychologist*, *56*, 803-813. doi:10.1037/0003-066X.56.10.803
- Gergen, K. J. (2009). An invitation to social construction (2nd ed.). Los Angeles, CA: Sage.
- Gray, A., & Elliot, S. (2001). *Refugee resettlement research programme 'Refugee voices'*.

 Retrieved from New Zealand Immigration Services website:

 http://www.immigration.govt.nz/NR/rdonlyres/0E39C519-13CA-48C7-B024-9A551642C0AC/0/RefugeeVoicesLiteratureReview.pdf

- Giorgi, A. (2002). The question of validity in qualitative research. *Journal of Phenomenological Psychology*, *33*, 1-18.
- Gordon, R. (2012). Where oh where are the clients? The use of client factors in counselling psychology. *Counselling Psychology review*, *27*, 8-17.
- Gorman, W. (2001). Refugee survivors of torture: Trauma and treatment. *Professional Psychology: Research and Practice*, *32*(5), 443-451. doi:10.1037/0735-7028.32.5.443
- Hansen, J. T. (2004). Thoughts on knowing: Epistemic implications of counseling practice. *Journal of Counseling & Development, 82,* 131-138. doi: 10.1002/j.1556-6678.2004.tb00294.x
- Hansen, J. T. (2006). Counselling theories within a postmodernist epistemology: New roles for theories in counselling practice. *Journal of Counseling & Development*, 84, 291-297. doi: 10.1002/j.1556-6678.2006.tb00408.x
- Hays, P. A. (2008). *Addressing cultural complexities in practice* (2nd ed.). Washington DC: American Psychological Association.
- Hayes, R. L., & Oppenheim, R. (1997). Constructivism: Reality is what you make of it. In T. L.Sexton & B. L. Griffin (Eds.), Constructivist thinking in counselling practice, research,and training (pp. 19-40). New York: Teachers College Press.
- Helms, J. E. (1995). An update on Helm's White and People of Color racial identity models. In J.G. Ponterotto, J. M. Casas, L. A. Suzuki, & C. M. Alexander (Eds.), *Handbook of multicultural counseling* (1st ed., pp. 181-198). London: Sage.
- Helms, J. E. (2003). A pragmatic view of social justice. *The Counseling Psychologist*, *31*, 305-313.

- Hiebert, B. (2001). *Creating a working alliance: Generic interpersonal skills and concepts.*University of Calgary: Author.
- Hiles, D. (1999, July). Paradigms lost-paradigms regained. Paper presented at the 18th International Human Science Research conference, Sheffield, United Kingdom. Retrieved from: http://www.psy.dmu.ac.uk/drhiles/Paradigms%20Lost.htm
- Hiles, D. (2001, October). *Heuristic inquiry and transpersonal research*. Paper presented at the meeting of CCPE conference, London, United Kingdom. Retrieved from: http://psy.dmu.ac.uk/drhiles/HIpaper.htm
- Hiles, D. (2005). *Contingent narratives: Fears and tremblings*. Retrieved from: http://eprints.hud.ac.uk/4938
- Hiles, D. (2002, October). *Narrative and heuristic approaches to transpersonal research and practice*. Paper presented at CCPE conference, London United Kingdom. Retrieved from: http://www.psy.dmu.ac.uk/drhiles/N&Hpaper.htm
- Hiles, D. (2008, November). *Participatory perspectives on counselling research*. Paper presented at NCCR conference, Newport, United Kingdom. Retrieved from: http://www.psy.dmuac.uk/drhiles/
- Hong, Y., Wan, C., No, S., & Chiu, C. (2007). Multicultural identities. In S. Kitayama, & D. Cohen (Eds.), *Handbook of cultural psychology* (pp. 323-345). New York: The Guilford Press.
- Kallivayalil, D. (2013). Women seeking political asylum: Negotiating authority, gender, and lost home. *Women & Theraoy*, *36*, 319-331. doi: 10.1080/02703149.2013.797845
- Kenny, M. E. & Romano, J. L. (2009). Promoting positive development and social justice through prevention: A legacy for the future. In M. E. Kenny, A. M. Horne, P. Orpinas, &

- L. E. Roys (Eds.), *Realizing social justice: The challenge of preventive interventions* (pp. 17-35). Washington DC: American Psychological Association.
- Khoa, L. X., & vanDeusen, J. M. (1981). Social and cultural customs: Their contribution to resettlement. *Journal of Refugee Resettlement*, 1, 48-51.
- Kozaric-Kovacic, D., Folnegovic-Smalc, V., Skrinjaric, J., Szajnberg, N. M., & Marusic, A. (1995). Rape, torture, and traumatization of Bosnian women: Psychological sequelae.

 *American Journal of Orthopsychiatry, 65, 428-433. doi:10.1037/hoo79656
- Kress, V. E., Eriksen, K. P., Dixon Rayle, A., & Ford, S. J. W. (2005). The DSM-Iv-TR and culture: Considerations for counselors. *Journal of Counseling & Development*, 83, 97-104. doi: 10.1002/j.1556-6678.2005.tb00584.x
- Kunz, E. F. (1973). The refugee in flight: Kinetic model and forms of displacement. *International Migration Review*, 7, 125-146. Retrieved from:
 http://www.jstor.org/stable/3002423
- Kunz, E. F. (1981). Exile and resettlement: Refugee theory. *International Migration Review, 15,* 42-51. Retrieved from: http://www.jstor.org/stable/2545323
- Kuo, B. C. H., & Arcuri, A. (2013). Multicultural therapy practicum involving refugees:Description and illustration of a training model. *The Counseling Psychologist, XX*, 1-32.doi: 10.1177/0011000013491610
- Laverty, S. (2003). Hermaneutic phenomenology and phenomenology: A comparison of historical and methodological considerations. *International Journal of Qualitative Methods, 2*. Retrieved from:

http://www.ualberta.ca/iiqm/backissues/2 3final/pdf/laverty.pdf

- Lee, P. L. (2013). Making new precious: Working with survivors of torture and asylum seekers.

 The International Journal of Narrative Therapy and Community Work, 1, 1-10.
- Li, Y., France, H., & Rodríguez, M. (2013). Acculturation and adaptation: Providing counselling for immigrants and refugees. In M. H. France, M. Rodríguez, & G. G. Hett (Eds.), *Diversity, culture, and counselling: A Canadian perspective* (2nd ed., pp. 139-156). Calgary, AB: Brush Education.
- Lichtenberg, J. W., Goodyear, R. K., & Genther, D. Y. (2008). The changing landscape of professional practice in counseling psychology. In S. D. Brown & R. W. Lent (Eds.), *Handbook of counseling psychology* (4th ed., pp. 21-37). Hoboken, NJ: John Wiley & Sons.
- Lin, K. M., Masuda, M., & Tazuma, L. (1982). Adaptational problems in Vietnamese refugees:

 III. Case studies in clinic and field: Adaptive and maladaptive. *Psychiatric Journal of University of Ottawa*, 7, 173-183.
- Lock, A., & Strong, T. (2010). *Social constructionism: Sources and stirrings in theory and practice*. Cambridge, UK: Cambridge University Press.
- Mahoney, M. J. (1991). *Human change process: The scientific foundations of psychotherapy*. New York: Basic Books.
- Maniapoto, M. (2012). Māori expressions of healing 'just therapy'. In A. Lock, & T. Strong (Eds.), *Discursive perspectives in therapeutic practice* (pp. 212-223). Oxford, UK: Oxford University Press.
- Marsella, A. J., Bornemann, T. H., Ekblad, S., & Orley, J. (1994). *Amidst peril and pain: The mental health and well-being of the world's refugees*. Washington, DC: American Psychological Association.

- Mezsaros, A. F. (1961). Types of displacement reactions among post revolution Hungarian immigrants. *Journal of Canadian Psychiatric Association*, *6*, 9-19.
- Millbank, A. (2000). *The problem with the 1951 Refugee Convention* (Report No. 5 2000-01).

 Retrieved from the Parliament of Australia website:

 http://www.aph.gov.au/library/pubs/rp/2000-01/01rp05.htm
- Miller, S. D., Duncan, B. L., & Hubble, M. A. (1997). *Escape form babel: Toward a unifying language for psychotherapy practice*. New York: W. W. Norton & Company.
- Modvig, J., & Jaranson, J. M. (2004). A global perspective of torture, political violence and health. In J. P. Wilson, & B. Drožđek (Eds.), *Broken spirits: The treatment of traumatized asylum seekers, refugees, war and torture victims* (pp. 33-52). New York: Brunner-Routledge.
- Mollica, R. F. (2006). *Healing invisible wounds: Paths to hope and recovery in a violent world.*Nashville, TN: Vanderbilt University Press.
- Mollica, R. F., & Caspi-Yavin, Y. (1991). Measuring torture and torture-related symptoms.

 *Psychological Assessment: A Journal of Consulting and Clinical Psychology, 3, 581-587.

 doi: 10.1037/1040-3590.3.4.581
- Mollica, R. F., Wyshak, G., & Lavelle, J. (1987). The psychosocial impact of war trauma and torture on Southeast Asian refugees. *American Journal of Psychiatry*, *144*, 1567-1572. Retrieved from: http://ajp.psychiatryonline.org/cgi/reprint/144/12/1567
- Morgan, A. K., & Drury, V. B. (2003). Legitimising the subjectivity of human reality through qualitative research method. *The Qualitative Report*, *8*, 70-80. Retrieved from: http://www.edu./ssss/QR/QR8-1/morgan.pdf
- Moustakas, C. (1961). Loneliness. Englewood Cliffs, NJ: Prentice-Hall.

- Moustakas, C. (1967). Heuristic research. In J. F. T. Bugental (Ed.), *Challenges of humanistic psychology* (pp. 101-108). New York: McGraw-Hill.
- Moustakas, C. (1990). *Heuristic research: Design, methodology, and applications*. Newbury Park, CA: Sage.
- Moustakas, C. (1994). Phenomenological research methods. Thousand Oaks, CA: Sage.
- Moustakas, C. (2001). Heuristic research: Design and methodology. In K. J. Schneider, J. F. T. Bugental, & J. F., Pierson (Eds.), *The handbook of humanistic psychology* (pp. 263-274). Thousand Oaks, CA: Sage.
- Moustakas, C, & Moustakas, K. (2004). *Loneliness, creativity & love: Awakening meanings in life*. LaVergne, TN: Xlibris Corporation.
- Munt, S. R. (2012). Journeys of resilience: The emotional geographies of refugee women. *Gender, Place, and Culture, 19,* 555-577. doi: 10.1080/0966369X.2011.610098
- Murray, K. E., Davidson, G.R., & Schweitzer, R. D. (2010). Review of refugee mental health interventions following resettlement: Best practices and recommendations. *American Journal of Orthopsychiatry*, 80, 576-585. doi: 10.1111/j.1939-0025.2010.01062.x
- Nash, M., Wong, J., & Trlin, A. (2006). Civic and social integration: A new field of social work practice with immigrants, refugees, and asylum seekers. *International Social Work, 49*, 345-363. doi:10.1177/0020872806063407
- Navas, M., García, M. C., Sánchez, J., Rojas, A. J., Pumares, P., & Fernández, J. S. (2005).
 Relative Acculturation Extended Model (RAEM): New contributions with regard to the study of acculturation. *International Journal of Intercultural Relations*, 29, 21-37.
 doi:10.1016/j.ijintrel.2005.04.001

- Neufeldt, A., Harrison, M. J., Stewart, M. J., Hughes, K. D., & Spitzer, D. L. (2001). *Immigrant women's experience as family caregivers: Support and barriers*. Edmonton, AB: PCERII.
- Ngo, V. H. (2008). A critical examination of acculturation theories. *Clinical Social Work, 9*, 209-216.
- Nilsson, J. E., Schale, C. L., & Khamphakdy-Brown, S. (2011). Facilitating trainees' multicultural development and social justice advocacy through a refugee/immigrant mental health program. *Journal of Counseling & Development*, 89, 413-422.
- Norcross, J. C. (2010). The therapeutic relationship. In B. L. Duncan, S. D. Miller, B. E. Wampold, & M. A. Hubble (Eds.), *The heart & soul of change: Delivering what works in therapy* (2nd ed., pp. 113-141). Washington DC: American Psychological Association.
- Nuttall, J. (2006). Researching psychotherapy integration: A heuristic approach. *Counselling Psychology Quarterly*, 19, 429-444. doi:10.1080/09515070601090121
- Nzojibwami, V. (2009). Creating space: How Mormon women reconcile their feminist attitudes within a patriarchal religion (Unpublished master's thesis). University of Calgary, Calgary, Alberta, Canada.
- Osborne, J. W. (1990). Some basic existential-phenomenological research methodology for counsellors. *Canadian journal of Counselling*, *24*, 79-91.
- Patton, M. Q. (1990). Humanistic psychology and humanistic research. *Person-Centered Review*, 5, 191-202.
- Pedersen, P. B. (1995). The five stages of culture shock. Westport, CN: Greenwood Press.

- Pedersen, P. B. (2002). Ethics, competence, and other professional issues in culture-centered counseling. In P. B. Pedersen, J. G. Draguns, W. J. Lonner, & J. E. Trimble (Eds.), *Counseling across cultures* (5th ed., pp. 3-27). Thousand Oaks, CA: Sage.
- Phinney, J. (2002). Ethnic identity and acculturation. In K. M. Chun, P. B. Organista, & G. Marin (Eds.), *Acculturation: Advances in theory, measurement, and applied research* (pp. 63-81). Washington, DC: American Psychological Association.
- Phinney, J. S., Horenczyk, G., Liebkind, K., & Vedder, P. (2001). Ethnic identity, immigration, and well-being: An interactional perspective. *Journal of Social Issues*, *57*(3), 493-510. doi: 10.1111/0022-4537.00225
- Phinney, J. S., & Ong, A. D. (2007). Conceptualization and measurement of ethnic identity:

 Current status and future directions. *Journal of Counseling Psychology*, *54*(3), 271-281.

 doi:10.1037/0022-0167.54.3.271
- Polanyi, M. (1966). The tacit dimension. Chicago, IL: The University of Chicago Press.
- Pope, K. S., & Garcia-Peltoniemi, R. E. (1991). Responding to victims of torture: Clinical issues, professional responsibilities, and useful resources. *Professional Psychology: Research and Practice*, 22, 269-276. doi:10.1037/0735-7028.22.4.269
- Raskin, J. D. (2002). Constructivism in psychology: Personal construct psychology, radical constructivism, and social constructionism. In J. D. Raskin & S. K. Bridges (Eds.), *Studies in meaning: Exploring constructivist psychology* (pp. 1-25). New York: Pace University Press.
- Rasmussen, A., Reeves, K., Rosenfeld, B., & Keller, A. S. (2007). The effects of torture-related injuries on long-term psychological distress in a Punjabi Sikh sample. *Journal of Abnormal Psychology*, *116*(4), 734-740. doi:10.1037/0021-843X.116.4.734

- Rober, P. (2002). Some hypotheses about hesitations and their nonverbal expression in family therapy practice. *Journal of Family Therapy*, *24*, 187-204. doi: 10.1111/1467-6427.00211
- Rober, P., & Seltzer, M. (2010). Avoiding colonizer positions in the therapy room: Some ideas about the challenges of dealing with the dialectic of misery and resources in families.

 Family Process, 49, 123-137. doi: 10.1111/j.1545-5300.2010.01312.x
- Rogers, C. R. (1985). Toward a more human science of the person. *Journal of Humanistic Psychology*, 25, 7-24. doi: 10.1177/0022167885254002
- Saldaña, D. (1992). Coping with stress: A refugee story. *Women & Therapy, 13,* 21-34. doi:10.1300/J015V13N01 04
- Sametband, I., & Strong, T. (2013). Negotiating cross-cultural misunderstandings in collaborative therapeutic conversations. *International Journal for the Advancement of Counselling*, 35, 88-99. doi: 10.1007/s10447-012-9169-1
- Scott, C., & Brown, K. (2008). Rising above my raisin'? Using heuristic inquiry to explore the effects of the Lumbee dialect on ethnic identity development. *American Indian Quarterly*, 32, 485-521. doi: 10.1353/aiq.0.0029
- Sela-Smith, S. (2002). Heuristic research: A review and critique of Moustakas's method. *Journal of Humanistic Psychology*, 42, 53-88. doi:10.1177/0022167802423004
- Sexton, T. (1997). Constructivist thinking within the history of ideas: The challenge of a new paradigm. In T. Sexton & B. Griffin (Eds.), *Constructivist thinking in counseling practice, research, and training* (pp. 3-18). New York: Teachers College Press.
- Silove, D. (2002). The asylum debacle in Australia: A challenge for psychiatry. *Australian & New Zealand Journal of Psychiatry*, *36*, 290-296. doi: 10.1046/j.1140-1614.2002.01036.x

- Silove, D. (2004). The global challenge of asylum. In J. P. Wilson & B. Drožđek (Eds.), *Broken spirits: The treatment of traumatized asylum seekers, refugees, war and torture victims* (pp. 13-31). New York: Brunner-Routledge.
- Silove, D., & Ekblad, S. (2002). How well do refugees adapt after resettlement in Western countries? *Acta Psychiatrica Scandinavica*, *106*, 401-402. doi:10.1034/j.1600-0447. 2002.2e012.x
- Simich, L. (2003). Negotiating boundaries of refugee resettlement: A study of settlement patterns and social support. *The Canadian Review of Sociology and Anthropology, 40,* 575-591.

 Retrieved from: http://web.ebscohost.com.ezproxy.lib.ucalgary.ca
- Simon, G. M. (2012). The role of the therapist in common factors: Continuing dialogue. *Journal of Marital and Family Therapy*, 38, 1-7. doi: 10.1111/j.1752-0606.2009.00135.x
- Singer, J., & Adams, J. (2011). The place of complementary therapies in an integrated model of refugee health care: Counsellors' and refugee clients' perspectives. *Journal of Refugee Studies*, *24*, 351-375. doi: 10.1093/jrs/fer001
- Smith, D. G. (1999). *Pedagon: Interdisciplinary essays in the human sciences, pedagogy, and culture.* New York: Peter Lang Publishing.
- Smith, J. A., & Osborn, M. (2003). Interpretative phenomenological analysis. In J. A. Smith (Ed.), *Qualitative psychology: A practical guide to research methods* (pp. 51-80). London: Sage.
- Social Sciences Research Council Summer Seminar on Acculturation (1954). Acculturation: An exploratory formulation, 1953. *American Anthropologist*, *56*, 973-1000. Retrieved from: http://www.jstor.org/stable/664755

- Stead, G. B. (2004). Culture and career psychology: A social constructionist perspective. *Journal of Vocational Behavior*, *64*, 389-406. doi:10.1016/j.jvb.2003.12.006
- Stephenson, S., & Loewenthal, D. (2006). The effect on counselling/psychotherapy practice of an absent father in the therapist's childhood: A heuristic study. *Psychodynamic Practice*, 12, 435-452. doi:10.1080/14753630600958304
- Stevens, C. (2006). A heuristic-dialogical model for reflective psychotherapy practice. In D. Loewenthal & D. Winter (Eds.), *What is psychotherapeutic research?* (pp. 171-181). London: Karnac.
- Sue, D. W., Arredondo, P., & McDavis, R. J. (1992). Multicultural counseling competencies and standards: A call to profession. *Journal of Counseling & Development, 70,* 477-486. doi: 10.1002/j.1556-6676.1992.tb01642.x
- Tenni, C., Smyth, A., & Boucher, C. (2003). The researcher as autobiographer: Analyzing data written about oneself. *The Qualitative Report*, *8, 1-*12. Retrieved from: http://www.nova.edu/ssss/QR/QR8-1/tenni.pdf
- Thapa, S. B., & Hauff, E. (2005). Gender differences in factors associated with psychological distress among immigrants from low- and middle-income countries: Findings from the Oslo Health Study. *Social Psychiatry and Psychiatric Epidemiology, 40,* 708-84. doi:10.1007/s00127-005-0855-8
- Tribe, R. (2002). Mental health of refugees and asylum-seekers. *Advances in Psychiatric Treatment*, 8, 240-248. doi: 10.1192/apt.8.4.240
- Turković, S., Hovens, J. E., & Gregurek, R. (2004). Strengthening psychological health in war victims and refugees. In J. P Wilson, & B. Drožđek (Eds.), *Broken spirits: The treatment*

- of traumatized asylum seekers, refugees, war and torture victims (pp. 221-242). New York: Brunner-Routledge.
- Turner, S., Gibson, N., Bennetts, C., & Hunt, C. (2008). Learning from experience: Examining the impact of client work upon two trainee therapists. *Counselling and Psychotherapy Research*, 8, 174-181. doi:10.1080/14733140802211085
- United Nations High Commissioner for Refugees. (1951). *Convention and protocol relating to the status of refugees*. Retrieved from: http://www.unhcr.org.au/pdfs/convention.pdf
- van der Veer, G. (1992). Counselling and therapy with refugees and victims of trauma (2nd ed.). Chichester, UK: John Wiley & Sons.
- van der Veer, G. (2008). Developing relevant knowledge and practical skills of psychosocial work and counselling. *Intervention*, *6*, 132-139. doi:10.1097éWTF.0b013e328307c9ba
- van der Veer, G., & van Waning, A. (2004). Creating a safe therapeutic sanctuary. In J. P. Wilson, & B. Drožđek (Eds.), *Broken spirits: The treatment of traumatized asylum* seekers, refugees, war and torture victims (pp. 187-219). New York: Brunner-Routledge.
- Vera, E. M., & Speight, S. L. (2003). Multicultural competence, social justice, and counselling psychology: Expanding our roles. *The Counseling Psychologist*, *31*, 253-272.
- Volkan, V. D. (2004). From hope for a better life to broken spirits. In J. P. Wilson, & B. Drožđek (Eds.), *Broken spirits: The treatment of traumatized asylum seekers, refugees, war and torture victims* (pp. 7-12). New York: Brunner-Routledge.
- Vontress, C. (2001). Cross-cultural counselling in the 21st century. *International Journal for the Advancement of Counselling*, 28, 83-97.

- Waldegrave, C. (2012). Developing a 'just therapy': Context and the ascription of meaning. In
 A. Lock, & T. Strong (Eds.), *Discursive perspectives in therapeutic practice* (pp. 197-211). Oxford, UK: Oxford University Press.
- Walsh, R. A. (1995). 'The approach of the human science researcher: Implications for the practice of qualitative research'. *The Humanistic Psychologist*, *23*, 333-344.
- Walter, J., & Bala, J. (2004). Where meanings, sorrow, and hope have a resident permit:

 Treatment of families and children. In J. P Wilson, & B. Drožđek (Eds.), *Broken spirits: The treatment of traumatized asylum seekers, refugees, war and torture victims* (pp. 487-519). New York: Brunner-Routledge.
- Wamplod, B. E. (2010). The research evidence for the common factors models: A historically situated perspective. In B. L. Duncan, S. D. Miller, B. E. Wampold, & M. A. Hubble (Eds.), *The heart & soul of change: Delivering what works in therapy* (2nd ed., pp. 49-81). Washington DC: American Psychological Association.
- West, W. (1998). Passionate research: Heuristics and the use of self in counselling research. *Changes, 16,* 60-66.
- West, W. (2001). Beyond grounded theory: The use of heuristic approach to qualitative research.

 Counselling and Psychotherapy Research, 1, 126-131.

 doi:10.1080/14733140112331385168
- Westermeyer, J. (1989). *Mental health for refugees and other migrants: Social and preventive approaches.* Springfield, IL: Charles C Thomas.
- Wilson, J. P. (2004). Theoretical, conceptual, and sociocultural considerations: Introduction. In J. P. Wilson, & B. Drožđek (Eds.), *Broken spirits: The treatment of traumatized asylum seekers, refugees, war and torture victims* (pp. 3-6). New York: Brunner-Routledge.

- Wong-Rieger, D., & Quintana, D. (1987). Comparative acculturation of Southeast Asian and Hispanic immigrants and sojourners. *Journal of Cross-Cultural Psychology, 18*, 345-362. doi:10.1177/0022002187018003006
- World Medical Association. (1975). *Declaration of Tokyo 1975*. Retrieved from: http://www.cirp.org/library/ethics/tokyo/
- Worthington, R. L., Soth-McNett, A. M., & Moreno, M. V. (2007). Multicultural counseling competencies research: A 20-year content analysis. *Journal of Counseling Psychology*, 54, 351-361. doi:10.1037/0022-0167.54.4.351
- Yakushko, O. (2006). Career development of immigrant women. In W. B. Walsh & M. J. Heppener (Eds.), *Handbook of career counseling of women* (2nd ed., pp. 387-426). Hillsdale, IN: Lawrence Erlbaum.
- Yakushko, O. (2009). Xenophobia and prejudice: Understanding the roots and consequences of negative attitudes towards recent immigrants. *The Counseling Psychologist*, *37*, 36-66. doi:10.1177/0011000008316034
- Yakushko, O., & Chronister, K. M. (2005). Immigrant women and counseling: The invisible others. *Journal of Counseling and Development, 83,* 292-298. doi: 10.1002/j.1556-6678.2005.tb00346.x
- Yakushko, O., Watson, M., & Thompson, S. (2008). Stress and coping in the lives of recent immigrants and refugees: Considerations for counselling. *International Journal for the Advancement of Counseling*, 30, 167-178. doi:10.1007/s1044-008-9054-0

APPENDIX A: SAMPLE RECRUITMENT NOTICE

Do you identify yourself as a refugee, refugee claimant, or asylum seeker? Have you ever been or are you currently involved in counselling? If your answer to the above questions is YES, I would like to invite you to share your experience of counselling in a research study to help contribute to improvement of the existing counselling services offered to refugees. Please contact Ivana at (403) 660-0974 or e-mail isilic@ucalgary.ca if you are interested in participating in this research study aimed at understanding refugees' experiences of counselling.

APPENDIX B: SNOWBALLING SAMPLING TEXT

My name is Ivana and I am a PhD student at the University of Calgary. I am conducting a research project about refugees' experiences of counselling. The aim of this research study is to identify what works for refugees in counselling from refugees' point of view with the intent of identifying what leads to successful/unsuccessful counselling outcomes. I am wondering if you know of any individuals who identify themselves as refugees, refugee claimants, or asylum seekers who have had experience of being in counselling and who may be interested in participating in this research project. If you do, could you please share with them my contact information? They can contact me at (403) 660-0974 or e-mail me at isilic@ucalgary.ca

APPENDIX C: SAMPLE INTERVIEW GUIDE

- 1. What is your experience of counselling?
- 2. What facilitated the counselling process for you?
- 3. What complicated the counselling process for you?
- 4. What aspects of counselling were particularly helpful for you?
- 5. What would specifically be useful for counselors to know in order to support refugees effectively in counselling?
- 6. What else would you like to share that would help me understand your experience better?

APPENDIX D: INFORMED CONSENT



Name of Researcher, Faculty, Department, Telephone & Email:

Ivana Djuraskovic, MSc PhD Candidate, Faculty of Education, Department of Educational Psychology, (403) 660-0974, isilic@ucalgary.ca

Supervisors:

Dr. Nancy Arthur

Title of Project:

Interrupted Journeys: The Experiences of Refugees in Counselling

This consent form, a copy of which has been given to you, is only part of the process of informed consent. If you want more details about something mentioned here, or information not included here, you should feel free to ask. Please take the time to read this carefully and to understand any accompanying information.

The University of Calgary Conjoint Faculties Research Ethics Board has approved this research study.

Purpose of the Study:

Your interest in this research is greatly appreciated. The purpose of this research is to better understand the experiences of refugees in counselling. Specific attention will be paid to: (1) what facilitates the healing process for refugees in counselling; (2) what complicates the counselling process for refugees; (3) what aspects of counselling are particularly helpful for refugees; and (4) what would be specifically be helpful for counsellors to know in order to support refugees in counselling. Another purpose of this research is to increase understanding of refugees' pre-, trans-, and post-migration experiences, factors that complicate refugees' resettlement and adaptation, as well as how these factors relate to refugees' counselling needs. If you choose to participate, your contribution will be highly valued for understanding refugees' counselling journeys.

What Will I Be Asked To Do?

Volunteers are sought for a research project that focuses on better understanding of the experiences of refugees in counselling. I am looking for individuals who identify themselves as refugees, and who have experienced counselling in Canada.

To participate in this research, you must identify yourself as a refugee who has experienced counselling, who is 18 years of age or older, and who has lived in Canada for at least two years. If you agree to participate, you will be asked to engage in an informal conversational interview that will be audiotaped. Each interview will take approximately 2 hours of your time. You are free to not answer any questions during the interviews and you may choose to withdraw from the project. However, once the data is analyzed, it will not be possible to withdraw individual interview material from the study. Within four months of completing the interview, you will be contacted via e-mail twice, and asked to review parts of the research and provide feedback about whether they accurately depict your experiences of counselling. The time limit on providing your feedback is two weeks; lack of response will be taken to indicate that you approve of the results.

What Type of Personal Information Will Be Collected?

Should you agree to participate, you will be asked to provide a detailed recollection of your experiences of counselling. Your anonymity is guaranteed, as your name will not appear in any transcript or report of the results. You will be asked to select a pseudonym for use in all records.

Are there Risks or Benefits if I Participate?

Talking about your experiences of counselling may be painful for some participants. If you experience distress as a result of your participation in this study please contact myself at isilic@ucalgary.ca or (403) 660-0974 to arrange support services. Additionally, you can contact:

Calgary Counselling Centre #200, 940 6 Ave SW Phone: (403) 265-4980

Eastside Family Centre #255, 495 36 St NE Phone: (403) 299-9696

Catholic Family Service #250, 707 10 Ave SW Phone: (403) 233-2360

Distress Centre Calgary 800 Macleod Trail SE Phone: (403) 266-1605

Benefits of taking part in this study may include a feeling of validation in telling your story and contributing to a unique area of research.

What Happens to the Information I Provide?

Participation is voluntary and your anonymity is guaranteed. You are free to discontinue your participation at any time. However, once the data is analyzed, it will not be possible to have your information separated from the results. Any information that you provide up to the point of data analysis will be destroyed if you choose to withdraw. If you choose to participate, the pseudonym you chose will be used in the transcripts and final draft. No one except the primary researcher will have access to the interview tapes, transcripts, and questionnaires, which will be stored in a locked cabinet. A summary will be made of the information you provide and it will be compared with other participants' information in order to describe common themes and issues. Details of your interview will be left out if it is felt that these details could reveal your identity. The anonymous data will be password protected and stored for five years on a computer, at which time it will be permanently erased. Tapes of the interview will be recorded over at this time and any paper information such as transcripts and notes will be shredded. The information that you provide may be used in future publications resulting from this research.

By choosing to participate, you are granting permission for the data to be used in the process of completing a PhD, including a dissertation and any other future publications. Permission is also granted to use quotes and stories in published articles and in presentations.

Signatures (written consent)

Your signature on this form indicates that you: (1) understand to your satisfaction the information provided to you about your participation in this research project; and (2) agree to participate as a research subject.

In no way does this waive your legal rights nor release the investigators, sponsors, or involved institutions from their legal and professional responsibilities. You are free to withdraw from this research project at any time. You should feel free to ask for clarification or new information throughout your participation.

Y	es	No:			
The pseudonym I choose for myself is					
My e-mail address is					
Participant's Name: (please print)					
			-		
Participant's Signature:			_		
Date:					

Researcher's Name: (please print)
Researcher's Signature:
Date:
Questions/Concerns
If you have any further questions or want clarification regarding this research and/or your participation, please contact:
Ivana Djuraskovic University of Calgary/Faculty of Education/Department of Educational Psychology (403) 660-0974, isilic@ucalgary.ca
Dr. Nancy Arthur
Faculty of Education/Department of Educational Psychology
(403) 220-6756, narthur@ucalgary.ca
If you have any concerns about the way you've been treated as a participant, please contact Russell Burrows, Ethics Resource Officer, Research Services Office, University of Calgary at (403) 220-3782; e-mail rburrows@ucalgary.ca
A copy of this consent form has been given to you to keep for your records and reference. The investigator has kept a copy of the consent form.
Would you like to receive a final copy of this research? Yes: No:

APPENDIX E: OATH OF CONFIDENTIALITY (TRANSCRIBER)



Name of Researcher: Ivana Djuraskovic, MSc PhD Cand.

Title of Project: Interrupted Journeys: The Experiences of Refugees in Counselling

Before I can hire you to transcribe research interviews, I must obtain your explicit consent not to reveal any of the contents of the tapes, nor to reveal the identities of the participants (i.e., refugees interviewed, their personal information, place of employment). If you agree to these conditions, please sign below.

Print Name:		
Signature: _		