The Social Worker's Role in the Context of Forced Migration: A Global Perspective

Mioara Diaconu
Western Michigan University

Laura Racovita-Szilagyi
Southern Adventist University

Brittni A. Bryan
Southern Adventist University

Follow this and additional works at: https://knowledge.e.southern.edu/ijbpgd

Part of the International and Area Studies Commons

Recommended Citation
Available at: https://knowledge.e.southern.edu/ijbpgd/vol2/iss2/1
The Social Worker’s Role in the Context of Forced Migration: A Global Perspective

Volume 2, Issue 1, 2016

Mioara Diaconu
Western Michigan University
mioara.diaconu@wmich.edu

Laura Racovita-Szilagyi
Southern Adventist University
racovita@southern.edu

Brittni Bryan
Southern Adventist University
brittnibryan@southern.edu

ABSTRACT
It has become increasingly more difficult to encounter news of today’s events and not become aware of the people who are suffering behind the scenes unfolding on our television sets, radio newscasts, screens and newspapers. Due to the multitude of media reports, we are more aware of what is happening in the remote corners of our world than we were only a few years ago. This awareness includes the fates of the people suffering from displacement due to conflict and violence. This paper seeks to explore available professional literature and present an exploratory study of the issues faced by today’s displaced populations as well as potential ways in which social workers can play a pivotal role in responding to these issues.

Keywords: Forced Migration, International Social Work, Non-governmental Organizations, Refugees, Internally Displaced Persons, Asylum Seekers, returnees
Introduction

The term “forced migration” has been present in professional literature since the official concept of refugee appeared in the 1951 United Nations Convention Relating to the Status of Refugees, with a definition of the term as well as the status and protection for refugees. During this Convention, a refugee became defined as “a person who, because of well-founded fear or persecution, finds himself outside his State of nationality, unable to obtain the protection of that State” (Ahmad, 2009). However, with the beginning of the post-Cold War period, and stricter immigration laws and policies in host countries around the world, professional theoreticians began to include a broader definition of forced migrants, encompassing refugees, asylum seekers, and internally displaced persons (IDPs) (Bakewell, 2007). Bermudez Torres (2007) define forced migration as the geographical relocation or movement of internally displaced people and refugees. Taking a slightly more comprehensive approach, Donà and Veale (2011) extend the definition of forced migration to address the cause of the movement – violence in general – and add another population: returnees. Each term refers to individuals in different legal situations, mostly related to the legal status in the nation-state where they find refuge. Refugees are often found in transitional refugee camps, and they apply for social and legal protection before entering the host or resettlement country. Individuals who are forced into migration but are not able to apply for protection until after entering the host country are considered asylum seekers. Such persons often combat negative perceptions and stigma in the host country, are generally given fewer privileges and rights than refugees, and have to wait longer periods to adjust their legal status to allow for resettlement (McKay, Thomas, & Kneebone, 2012).

According to the United Nations High Commissioner for Refugees (UNHCR), in 2012 there were approximately 928,200 asylum seekers worldwide. In the same year, the UNHCR also identified 17.1 million internally displaced people (IDPs) worldwide and defined these individuals as those experiencing a refugee-like situation who relocate within the borders of their country of origin. Prior to that, it was estimated that worldwide in 2003, there were 100 to 200 million forced migrants, encompassing all categories as defined above (Turton, 2003). Currently, these high numbers combine with other figures detailing the occurrence of stateless persons and other refugees to total a staggering 45.2 million persons of concern worldwide (UNHCR, 2012a). With such overwhelming numbers, the issue of forced migration has become a global concern that must be addressed. Social workers are among the front line workers who provide primary assistance, education and case management, and work behind the scenes to shape policies in advocacy and lobbying roles.

In an era of globalization and the wider processes of social and economic change, there is more awareness that events in one region of the globe affect almost everyone else, and thus forced migration has become an area of global tension. Van Hear (2012) states that there is a fair amount of policy conflict in host countries over the fear of depleting resources as well as social change due to immigrant populations. Al-Qdah and Lacroix (2010), in a study of Iraqi refugees in Jordan, also express concerns over the strain placed on the country’s resources by the overwhelming number of regional refugees. A 2011 article by Pei Palmgren specifies that forced migration causes social transformation and encourages that research on the topic focus on global societal change. Since forced migration is most often associated with violent conflicts, persecution, generalized violence, and human rights violations (UNHCR, 2012a), it can be
concluded that forced migration is a factor that weakens social bonds, reduces capacity building and undermines the efforts of societies to achieve positive change.

According to Castles (2003), forced migration “has grown dramatically” in the post-Cold War period (p.14). A review of world events in the past 10 to 20 years will reveal that there has been an increase in the numbers of natural and man-made disasters, as well as armed conflicts. Additionally, today’s conflicts aim more at controlling specific groups as a means to seize or expand their territory and control resources, as was the case in the recent conflicts in Colombia and Sierra Leone (Azam & Hoeffler, 2002); this goal often includes mass population expulsion. We see this trend especially in the past ten years, with the protagonists of such conflicts no longer being traditional armies, but irregular forces such as militias, anti-governmental forces, cartels, etc. (Azam & Hoeffler, 2002; Castles, 2003). Moreover, human and citizenship rights have also been strong factors in the forced migration of people in Sudan, Rwanda or Eritrea, where belonging to specific ethnic groups separated the “recognized” citizens from all other groups, stripped of their human and citizenship rights, and caused them to flee for their lives (Doná & Veale, 2011).

Due to globalization, today there is hardly any country that has not been affected by forced migration and refugee issues, either as a host country or as a producer of refugees (Lester, 2005). Politicians and economists debate the advantages and disadvantages of forced migration to host countries. For example, they may consider the strain or advantage that forced migration can have on their national economy, resources and culture. According to the UNHCR (2002), forced migrants “put enormous strain on local resources of the hosting country.” This can be clearly seen by the fact that host governments usually must provide assistance for relocating, resettling, or repatriation of forced migrants (Al-Qhad & Lacroix, 2010; Anderson, 2012; Harper, 2008). On the other hand, forced migrants “often make important contributions to local communities, especially when given the opportunity to integrate” (UNHCR, 2012b, p.12). Many professionals agree with the idea that developed labor-importing host countries need the labor that the migrants provide (Castles, 2010). Despite the many positive contributions to their host community, refugees and asylum seekers can present a plethora of needs to the society in which they try to resettle. These can include mental health concerns such as Post Traumatic Stress Disorder (PTSD); socio-economic concerns such as a lack of housing, education or work; and legal needs such as personal documentation (UNCHR, 2012b). Therefore, this paper will seek to summarize these issues and provide an overview of the role of social workers in helping forced migrants within these three major areas of concern: mental health, socio-economic and legal matters.

Mental Health Concerns and the Role of Social Workers

It has been widely recognized that in the area of mental health there are two issues faced by all forced migrants: trauma and loss. Trauma has been experienced by all forced migrants in one way or another; the difference between cases is in the length of time, how much, and what kind of trauma they have experienced (Delgado, Jones, & Rohani, 2005). The forced migration process itself may be traumatic for individuals, with the trauma stemming from the deep sense of loss that they experience (Crisp, 1996). There are different types of loss, and forced migrants may experience some, all, or few of them. Material loss refers to the physical, familiar
environment left behind, and encompasses the home or any other physical assets the individuals may have possessed in the home country (Galambos, 2005). Refugees, asylum seekers and IDPs lose their homes, their communities, their jobs, and are often forced into poverty, which can be detrimental to their mental health and well-being (Palmer, 2007). At the emotional level, Galambos (2005) and Palmer (2007) mention that refugees, asylum seekers, or IDPs may experience the loss of family members, friends, long-standing social contacts, and their overall social support and community. Galambos (2005) adds that a cultural loss is also experienced; specifically, the loss of established social norms and values. In addition, there are unique psychosocial problems, such as extreme anger, that characterize the experience of these individuals or those who are secondary victims to the loss (George, 2012).

Other mental health issues faced by forced migrants include a wide range of presentations of Post-Traumatic Stress Disorder (PTSD), major depression often caused by the sense of loss, suicidal thoughts and suicides, anxiety disorders stemming from the trauma experienced, sleep disturbances, impaired concentration and loss of memory due to the traumatic events that preceded the flight or during the fleeing process itself, community and family stigma faced due to the loss of the original socio-economic status, a lowering in the individuals’ standards of living, and a sense of “giving up” on facing the issues that caused the migration in the first place (Boisvert, 2006; George, 2012; Kim, Torbay, & Lawry, 2007). Additionally, in refugee situations, individuals face safety issues with later implications for mental health. In refugee camps, women and girls are often exposed to more gender-based violence and are more likely to experience depression and post-traumatic stress than men (Drumm, Pittman & Perry, 2003; George, 2012; Grace, 2013; Hatoss & Huijser, 2010; Keller et al., 2006; Rider, 2012).

Professionals in the human services field specify that individuals who experienced forced migration need long-term recovery mental health interventions such as group, individual, and family counseling, cognitive behavioral therapy, and learning relaxation techniques, as well as a psychosocial education of the host community (Boisvert, 2006). Taking a holistic approach by incorporating social and political factors will help to further improve forced migrants’ quality of life across geographical locations and settings (Palmer, 2007). By providing for these basic needs, especially in the areas of safety, education, health care, counseling, and most importantly the provision of psychosocial support, the overall well-being of the individuals might be improved (Kim, Torbay, & Lawry, 2007).

Social workers play key roles in addressing the mental health issues of forced migrants in a variety of settings. In Jordan, for example, many school counselors lack basic knowledge regarding Iraqi refugee children behavioral needs (Al-Qdah & Lacroix, 2010); in these cases, social workers are called to become educators to the teachers and counselors, imparting best practices for addressing the specific needs of this population. Research shows that a majority of the Iraqi refugees in Jordan come from urban areas and struggle with the trauma and loss, as well as new stressors which impact individual and family lives, such as behavioral problems in children, depression and anxiety, domestic violence, and parental relationships altered by the immigration process (Al-Qdah & Lacroix, 2010; Bronstein, Montgomery & Dobrowolski, 2012).

In a study on the levels of PTSD in unaccompanied male adolescents seeking asylum in the United Kingdom, Bronstein, Montgomery and Dobrowolski (2012) found that cumulative trauma has a high correlation with PTSD symptoms reported by the respondents. However, the
same study also shows that only a third of the surveyed teenagers show clinical levels of PTSD, attesting to the high resilience in displaced children. Social workers are prepared to address these issues, and must carefully consider the cultural and migratory context of each individual and group (Bronstein, Montgomery & Dobrowolski, 2012). George (2012) found that South Asian refugees in Canada have experienced high levels of re-traumatization and psychological distress caused by immigration interrogations, as well as anxiety, depression, and culture shock in their new country. Hatoss and Hujiser (2010) found that trauma- and family reunification-related anxieties were issues specifically affecting Sudanese refugees in Australia. In the context of former child soldiers’ rehabilitation, Ochen (2012), Rider (2012) and Woodward and Galvin (2009) identify unique challenges to resettlement and social integration that include acceptance and reintegration of these children. In Northern Uganda, social programs specifically addressing social rehabilitation and reintegration of former child soldiers yielded mixed results: while accepted on the surface, youth still experienced marginalization and a shunning of their children born while in captivity (Doná & Veale, 2011). John-Kall and Roberts (2010) address the issue of rehabilitation of men in gender-based violence prevention programs aiming to recognize the traumatic events as war perpetrators and reframing their concept of violence and appropriate gender relationships.

In a qualitative study of Sudanese refugees in Australia, Marlowe (2010) advised mental health professionals working with refugees to be listeners first and foremost, integrating the pre-forced migration experience in the psychosocial interventions, with the intent of understanding the context of the individuals’ hopes for their future. Ochen (2012) specifically mentioned the benefits of group and play therapy as well as storytelling as interventions with children who experienced conflict in Northern Uganda. Social workers are well equipped to work with diverse populations within the forced migration context, respecting the cultural, social, and spiritual aspects that inform resilience and healing.

Socio-Economic Issues in Forced Migration and Social Work’s Function

Not only do refugees often suffer from mental health issues such as PTSD, depression, or anxiety, but they also struggle with socio-economic issues. Forced migrants often have limited or no access to health care, welfare, or social services in the host or transitional countries (George, 2012). In the United States, for example, asylum seekers are ineligible for government social services. Instead they must depend on private social service agencies and charitable organizations for meeting their basic needs: food, shelter, clothing, or money for transportation. Additionally, asylum seekers are ineligible for governmental aid for housing, cash assistance, work authorization, and health insurance. In Jordan, where refugees are considered “guests” or “visitors,” there are no explicit policies to address the specific needs of this population (Al-Qdah & Lacroix, 2010). In Kenya, refugees and asylum seekers must spend much of their financial resources and time in order to register with the appropriate authorities and acquire the legal documentation that will allow them to seek employment and gain access to other resources (Anderson, 2012).

Within the global context, most international social workers are found working with non-governmental organizations (NGOs) to address these issues and provide planning for and implementation of assistance programs. Therefore, social workers have major roles to play in
providing public awareness, advocating for resources and education, community organizing, and planning and delivering peace and reconciliation programs planning and delivery (Al-Qdah & Lacroix, 2010). Specifically, it is recommended that social workers be knowledgeable about the available services and in-country/third-country resettlement options while providing culturally appropriate interventions that address and respect the individuals’ right to self-determination and are aligned with the refugee/forced migrant community values (George, 2012; Libal & Harding, 2011).

The social and economic situation can have negative effects on the dignity of forced migrants and may be very humiliating, affecting all levels of functioning and emotional well-being (Delgado, Jones, & Rohani, 2005). Many refugees and asylum seekers may find that they are obliged to live as second-class residents, with limited privileges, rights, freedoms, and benefits, until they receive their refugee status from the host country (George, 2012). From the early days of research in the different areas of forced migration, it has been recommended that NGOs as well as governmental agencies provide specialized training for refugees and asylum seekers. These services should include: training on micro-entrepreneurial or job skills (Aysa-Lastra, 2011; Frederico et al., 2007); strategies for providing balanced nutrition on a limited budget (Gunnell, Christensen, Jewkes, LeBlanc, & Christofferson, 2014); guidance on financial strategies and the legal system (Hatoss & Huijser, 2010); methods on integrating with the host community (Hatoss & Huijser, 2010; Ochen, 2012); safe and unsafe health practices, especially relating to children and women’s health (Al-Qdah & Lacroix, 2010); peace education and reconciliation to build social capital (Frederico et al., 2007); and generally resolving differences between the old and the new cultures (George, 2012). In addition, NGOs must assist in addressing the gender specific issues of women, who often become heads of households and thus must support their families; programs that address empowerment and human rights, as well as ensure women’s access to resources, provide key interventions to this special population (Al-Qdah & Lacroix, 2010).

NGOs in particular hold keys to addressing most socio-economic issues faced by forced migrants. Scholarly literature shows that it is advantageous for NGOs to implement outreach programs to encourage displaced people, whether in their own country or an international context, to seek assistance (Al-Qdah & Lacroix, 2010; Anderson, 2012; Arias, Ibáñez & Querubin, 2014; Frederico, et al, 2007; Libal & Harding; 2011). This way, the NGO can become a venue for providing emotional support, facilitating referrals for health care, social services, and protection. In addition, NGOs can ensure that individuals have access to social reintegration programs provided by other NGOs or governmental organizations and programs such as vocational training, income generation projects, or established communities of interest such as refugees support groups (Al-Qdah & Lacroix, 2010; Anderson, 2012; Lester, 2005; George, 2012).

Research also shows that access to education is a determining factor in successful resettlement; by providing refugee children and adolescents with education, they are granted a sense of continuity, of achievement, and friendship/companionship (Lerner, 2012). It is recommended that NGOs provide cultural programming, including advocating on behalf of refugees to a host country’s institutions such as schools, police, etc. (Nawyn, 2006). Also, NGOs should help celebrate and organize religious and other meaningful activities for both the
displaced population and the host community so that they build bridges across the cultural environments (Nawyn, 2006). Such activities may assist in the fast integration of migrants and immigrants while preserving their original cultural heritage (Menjivar, 2006). Within the field of the sociology of forced migration there is a wide recognition that there is a strong relationship between violence, forced migration, and social transformation; thus social and economic issues must be addressed to aid in the process of resettlement in the mainstream culture (Bakewell, 2007).

It is important to recognize that socio-economic issues are not exclusive to refugees and asylum seekers; internally displaced persons (IDP) encounter many of the same challenges after being forced to relocate within the borders of their own countries. By 2009, Colombia was internationally recognized as having the largest number of IDPs in Latin America (Aysa-Lastra, 2011). Due to the specific contexts that influence forced migration, many internally displaced people were not prepared to migrate, but fled the presenting armed conflict without resources or specific plans for relocation. Moreover, many IDPs came from a rural background, with few transferable skills into the urban areas of resettlement. Lack of access to resources, lack of knowledge about resources, and lack of employment and proper housing all contributed to the socio-economic issues faced by IDPs. Social workers have an ethical mandate to address social and economic justice issues (NASW, 2008), therefore placing them in a position to advocate for resources, provide education and training to IDPs, and assist in the process of returning to the place of origin post-conflict, or resettlement at the reception site through building community and social networks (Arias, Ibáñez & Querubin, 2014; Aysa-Lastra, 2011).

**Legal Issues and Social Work’s Position**

In addition to socio-economic issues, George (2012) points to several aspects that forced migrants may face in the host country, as they relate to their legal status, temporary or permanent. First, it is recognized that in most countries, the process of resettlement may take a long time, during which the immigrants may not have any access to governmental or settlement assistance. Another issue faced by those who hurriedly flee persecution or violence is that they may be missing important personal documents that prove their identity or education: documents such as birth certificates, marriage certificates, educational diplomas, and even passports, as oftentimes refugees use false names or documentation to be able to escape in emergency situations (UNHCR, 2012b). Additionally, in order to qualify for legal documents, refugees and asylum seekers must show proof of the reasons they left their country of origin; the abuse experienced there can be very hard to prove as personal accounts are tainted by PTSD, anxiety disorders, memory loss due to trauma experienced, etc. Physical evidence, witness accounts, or other documentation of abuse may be very difficult to produce or conserve during the immigration process. This may, in turn, impede the completion of the resettlement process, since asylum seekers and refugees may not be able to prove the persecution experienced in their country of origin. Furthermore, research has shown that there is a stigma associated with the mobility of these individuals (Al-Qdah & Lacroix, 2010; Harper, 2008; Libal & Harding, 2011; Marlowe, 2010). In Jordan, for example, research evidence shows that highly skilled workers are more likely to receive visas that allow applicants to work, while the same is not true regarding lower-skilled refugees (Al-Qdah & Lacroix, 2010). Castles (2012) also brings the distinction...
between the attitudes toward higher skilled professionals’ immigration, sometimes termed as “professional mobility,” versus the attitudes toward perceived lower-class, lower-skilled individuals which are marginalized and labeled “immigrants” no matter how dire the circumstances that caused the move (Castles, 2012). This distinction is most visible when forced migrants are facing the legal system. When looking at the issues faced by refugees, asylum seekers, IDPs, and returnees, we must be aware that there is no short or easy answer that will “cure” all these issues. The answers are most often long term interventions at all the above-mentioned levels.

To secure forced migrants’ human rights and a dignified standard of living in the host country, it is recommended that they should be granted legal status – temporary or permanent, depending on the individual circumstances (International Journal of Refugee Law, 2006). Social workers have a specific role to play in raising awareness regarding the legal needs of refugees, asylum seekers, IDPs and returnees. They must advocate for a stable social environment and access to employment, health, and other resources through legalizing the status of forcibly displaced people in their transition or resettlement country (Al-Qdah & Lacroix, 2010). In addition, as evidenced by a study conducted in Kenya (Anderson, 2012), social workers should mediate between NGOs and UNHCR to promote a streamlined legal process that is accessible to the specific population of interest, and is provided in close geographical proximity to the areas where refugees and displaced people reside.

When analyzing the legal needs of Iraqi refugees to different countries in the Middle East, it is important to recognize several aspects: research shows that most Iraqi refugees in Syria were largely well-educated, with the most pressing issue being that of access to medical care (Harper, 2008). Iraqi refugees in Jordan were shown to have arrived as family units, with the poorest families being those with female heads of household – either as single mothers, one of other wives of the same man, or as widows, due to lack of access to employment for the women (Al-Qdah & Lacroix, 2010; Harper, 2008). From a legal perspective, even though refugees are considered visitors in Jordan without specific policies addressing their needs, as of 2007 Jordan has allowed refugee children to attend public schools, a major win for international organizations advocating for refugee children’s rights in that country (Al-Qdah & Lacroix, 2010; Harper, 2008). The situation of refugees in Lebanon, however, is very different: research shows that most Iraqi refugees entered the country illegally, and therefore lack any legal documentation for staying and accessing employment and education. The same study showed that more than half of the respondents felt unsafe in Lebanon due to their legal status (Harper, 2008).

Grace (2013) reports on the situation of the Zigula who took refuge in Tanzania during the conflict in Sudan. Through the “Intra-African Refugee Resettlement Project,” the Tanzanian government recognized Zigula refugees as having a local ancestry and provided individuals with citizenship through autochthony, or their ancestral links to the local area (Grace, 2013). However, in this case, even while having a legally recognized status, the Zigula still lived in the Chogo refugee camp, experienced dire poverty without access to safe water or medical care, and were relegated to a “second-class citizen” position, experiencing marginalization and stigma in the larger community (Grace, 2013). The case of the Zigula refugees in Tanzania is an example of how social workers can advocate for and provide education to the local community on how to
integrate refugees and assist in the resettlement process through community building and social integration networks.

In addition to recommending short term solutions for assisting refugees, asylum seekers, and IDPs with accessing much-needed resources, integrating locally, or resettling those vulnerable populations for whom no other solution is feasible, UNHCR proposes another long-term solution that includes voluntary repatriation whenever possible and deemed safe (UNHCR, 2012a; UNHCR, 2012b). Repatriation processes, as well as returning to the place of origin for IDPs, may seem like feasible solutions; however, many returnees, upon arriving home, find themselves in socio-economic situations that are actually more difficult. Such circumstances are often due to lack of documentation regarding their original property, which then impedes land restitution, or to a lack of social networks to assist in the rebuilding processes (Arias, Ibáñez, & Querubin, 2014). It is important to recognize the importance of advocacy in favor of return policies that would provide for individuals and families who want to return to their place of origin as well as for those who want to remain at the reception site in the case of IDPs, or third country resettlement in the case of refugees (Arias, Ibáñez, & Querubin, 2014).

**Recommendations for Practice, Policy and Further Research**

In the face of increasing migratory patterns due to conflicts, or natural or man-made disasters, social workers, as well as other professionals must adopt a culturally competent practice. Embracing a culturally competent framework for practice encompasses several stages of awareness and skill development: (1) Awareness of practitioner’s own beliefs, values and norms; (2) Awareness of norms and values of the population to be served – acquiring knowledge and learning; (3) Continuously developing new skills and recognizing personal limitations (Delgado, Jones, & Rohani, 2005; George, 2012). Being culturally competent also includes recognition of the power dynamic between the social worker and the refugee (George, 2012).

Within the process of recognizing personal limitations, it should be mentioned that professionals, and social workers in particular, should recognize the importance of a culturally competent practice that addresses client issues in the context of their understanding and cultural awareness. Professionals should be aware that mental health services provided by NGOs may be utilizing a Western model of diagnoses and treatment, which may or may not be applicable to the cultural environment where they are operating (Delgado, Jones, & Rohani, 2005; George, 2012). Furthermore, the Diagnostic and Statistical Manual of Mental Health Disorders (DSM), published by the American Psychological Association, has been based on tests and assessment criteria written by American and/or Western psychologists, psychiatrists, and other professionals. Therefore, the validity of the tests may come into question when applied to forced migrants receiving mental health services, individuals who often have a different set of cultural norms and values (Delgado, Jones, & Rohani, 2005). Thus, it is of utmost importance that social workers and other professionals focus on improving best practices when working with forced migrants. Best practices should include ecological perspectives that emphasize the significance of social and economic justice values without discounting the clients’ cultural norms and social understandings (Delgado, Jones, & Rohani, 2005).

There are numerous avenues through which social work practitioners can help shape policy regarding services and resources for forced migrants. Of the most prominent, social
workers should get involved in advocacy and policy change on behalf of refugees, asylum seekers, IDPs and returnees who may not be entitled to services, or lack access to them due to their circumstances (Delgado, Jones, & Rohani, 2005). As evidenced in the case of Jordan’s allowing refugee children to attend their public schools (Libal & Harding, 2011), international and local advocacy plays an important role in social change and assistance provisions to forced migrants.

Though there has been ample research in the past few years dealing with the experience of forced migrants, there is still a pressing need for further applied research on how social service providers can best respond to these individuals in ways that incorporate cultural competency, and on evidence-based practices. It is of utmost importance to identify key diagnostic concepts and tests that may need more culturally sensitive criteria to be applicable to forced migrants and that may help better diagnose individuals from various cultural backgrounds (George, 2012). Additionally, there is a pressing need for research that addresses administrative and leadership issues, and includes community organizing to help with long term sustainment of programs for refugees, asylum seekers, IDPs, and returnees (UNHCR, 2012).

In the context of today’s global village, world influences and population movements, it is of paramount importance for social workers, as well as other professionals, to know the issues faced by forced migrants, and to understand challenges and celebrate successes in the developing field of forced migration. Refugees, asylum seekers, internally displaced persons, and returnees are all vulnerable to the nuances of the resettlement process, including but not limited to emotional issues, socio-economic issues, and legal issues. It is therefore clear that an organized response following best practices must include culturally competent services, advocacy, and thoroughly supported community integration.
References


UNHCR. (2002). Economic and social impact of refugee populations on host developing countries as well as other countries: Partnerships with bilateral development agencies. Retrieved from: [http://www.unhcr.org/3cff5b1e2.pdf](http://www.unhcr.org/3cff5b1e2.pdf)
