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A Dream Best Forgotten: The Phenomenology of Karen Refugees’ Pre-Resettlement Stressors

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Abstract
Refugees are often forced into states of imposed vulnerability in which loss is common and migration is normative. Karen refugees from Myanmar have endured a long civil war with the Burmese government, followed by their forced relocation to refugee camps and subsequent global resettlement. This phenomenological study aimed to understand the meanings ascribed to pre-resettlement stress among resettled Karen refugees. We interviewed six participants who were identified through purposeful sampling in a Karen refugee community. Using phenomenological analysis, we identified and interpreted 286 meaning units. The meaning units were then grouped into four themes: (a) Loss From Oppression, (b) Resignation and Acceptance in a Context of Regular Violence, (c) Ongoing Insecurity While Confined in Camps, and (d) Redefined Selfhood. The results provide a contextual understanding of the pre-resettlement stressors experienced by Karen refugees.

Keywords: Karen refugees, Burma, Myanmar, pre-resettlement stress, phenomenology
Myanmar (Burma) has been engulfed in civil war since the country gained independence in 1948. The conflict in Myanmar is one of the longest active civil wars in history. Currently, the Burmese government retains power, whereas oppressed groups seek independence. As a result, many people from Myanmar, including the Karen, an ethnic group indigenous to southeastern Myanmar, have been internally displaced or forced to leave their homes for resettlement areas. It is estimated that more than 150,000 people have left Myanmar for refugee camps in Thailand (United Nations High Commissioner for Refugees, 2013). Between 2005 and 2011 alone, more than 70,000 refugees, mostly Karen, were moved from camps in Thailand to countries including Australia, Canada, and the United States (Karen Buddhist Dhamma Dhutta Foundation, 2011). The United States has provided asylum and refugee status to a number of Karen who, upon fleeing Myanmar, encountered harsh conditions in Thai refugee camps. Although the stressful nature of refugees’ forced migratory experiences has been documented (e.g., Short et al., 2009), we know little about the stressors and psychological outcomes experienced by Karen refugees. Considering the influx of Karen in the United States, we investigated the experiences of pre-resettlement stressors in a sample of refugees in a midsized, Midwestern city. We hope that our findings will inform future psychological services for this growing population.

Pre-resettlement stressors were defined as any distress individuals experience from the time they are forced to leave home until formal resettlement in a new country. These stressors may result from exposure to intense violence, living in a refugee camp, or migrating to a new country. We chose to use the term stressors, as opposed to traumatic experiences, to avoid potentially pathologizing the Karen people and their experiences. Given cultural stigmas associated with psychological illness and trauma, we thought it was important to investigate pre-resettlement stressors from a within-group perspective and to conceptualize the meaning of the Karen peoples’ experiences using a context-sensitive lens (Marsella, Friedman, & Huland Spain, 1996).

Karen Refugee Context

The civil war in Myanmar, which has been marked by periods of ethnic cleansing and a military coup led by General Ne Win in 1962, began when the country gained independence from Great Britain after World War II (Aung-Thwin & Aung-Thwin, 2012). Throughout, the ruling party in Myanmar, the Burmese government, has used extreme violence to repress individuals with dissenting views. During this time, the Karen have opposed this repressive regime and have attempted to establish independence from the government, declaring a sovereign (unrecognized) country within the borders of Myanmar. The
Karen National Union (KNU), funded by the Karen National Liberation Army (KNLA) and operating from the Karen state in southeastern Myanmar, began fighting against this oppression in 1949 (Amnesty International, 1995; Core, 2009). Violence in Myanmar continued throughout the 20th century (Adams & Saunders, 2005; Amnesty International, 1995; Burma Watcher, 1989; Core, 2009). In the process, many Karen have been displaced from their homes, sought refuge in Thailand, and resettled around the world.

Refugee Mental Health

Refugee groups throughout the world have endured a spectrum of stressors. These stressors have been endured at both individual and collective levels (Papadopoulos, 2007). The potential psychological repercussions of refugees’ forced migration experiences have been well documented (e.g., Fazel, Wheeler, & Danesh, 2005; George, 2012; Lindert, von Ehrenstein, Priebe, Mielck, & Brähler, 2009; Nicholl & Thompson, 2004; Palic & Elklit, 2011; Yakushko, 2010). In a meta-analysis of empirical literature including more than 7,000 refugee participants from studies in Western countries (e.g., United States, Canada, and Australia), refugee groups exhibited higher prevalence rates of psychological distress in comparison to general populations (Fazel et al., 2005). Further, traumatic premigration experiences have been shown to be predictive of anxiety in Vietnamese refugees (Birman & Tran, 2008) and symptoms of posttraumatic stress disorder (PTSD) in Bosnian (Miller et al., 2002) and Yugoslavian war-affected refugees (Priebe et al., 2013). Symptoms of posttraumatic stress, anxiety, depression, and somatization were also associated with premigration stress in a sample of Burmese refugees resettled in Australia (Schweitzer, Brough, Vromans, & Asic-Kobe, 2011). Karenni refugees, who are related to the Karen, have also demonstrated measurable levels of PTSD in Thai camps (Cardozo, Talley, Burton, & Crawford, 2004). Therefore, in the present study, we explored the lasting psychological impact of living in the context of warfare and strife for Karen refugees, with the goal of providing implications for best practices in resettlement service provision upon resettlement.

Individuals may experience psychological distress beyond that which they endure at the time of the stressful event or experience. Refugees, in particular, are at elevated risk for experiencing psychological distress as a result “of significant personal disruptions and experiences of torture, trauma, and loss” (Murray, Davidson, & Schweitzer, 2010, p. 577). Reactions to stressful pre-resettlement experiences may be heightened among refugees, as they are tasked with the additional burden of making multiple life adjustments during migration and resettlement (Davidson, Murray, & Schweitzer, 2008; Murray et al.,
Research has demonstrated that symptoms of psychological dysfunction among refugees worsen upon their exposure to various resettlement experiences (e.g., Priebe et al., 2013). For example, Somali refugee women who had resettled displayed additional stress related to their children’s adjustment, which highlights the various familial and social factors that influence the well-being of a given refugee group (Nilsson, Barazanji, Heintzelman, Siddiqi, & Shilla, 2012). The stress inherent in resettling and acculturating has also been associated with symptoms of depression (Birman & Tran, 2008; Miller et al., 2002). In comparison with refugees who reported lower levels of post-resettlement stress, refugees in an outpatient clinic in Norway who had experienced post-resettlement stressors such as poor social networks, poor social integration, and unemployment, exhibited more frequent psychiatric comorbidity and more severe symptoms of PTSD (Teodorescu, Heir, Hauff, Wentzel-Larsen, & Lien, 2012). Further, psychological symptoms have been found to increase over the first decade of resettlement but decrease shortly thereafter (Tran, Manalo, & Nguyen, 2007). Essentially, forced resettlement and acculturation have been found to amplify mental health concerns for refugees. Research with Burmese refugees living in Australia found that psychological intervention effectively decreased mental health symptoms (van Wyk, Schweitzer, Brough, Vromans, & Murray, 2012). In addition, transcendental meditation has been effective in decreasing symptoms of posttraumatic stress in Congolese refugees (Rees, Travis, Shapiro, & Chant, 2013). These findings are promising, but more research is needed to establish effective evidence-based treatments for refugee populations (Murray et al., 2010).

Culture, Meaning Making, and Exposure to Trauma

Conceptualizing the mental health of refugee groups cannot be separated from the role of culture and meaning making in the manifestation of distress. Culture may influence the nature and degree of meaning that an individual ascribes to a traumatic experience and may impact whether he or she would benefit from a particular psychological intervention (Gusman et al., 1996). By carefully exploring diverse clients’ histories, clinicians can gain clinical insight into their clients’ experiences and provide culturally inclusive and relevant treatments (Gusman et al., 1996). Researchers have, for instance, sought to understand the meaning that Karen and Chin refugees ascribe to losing their homes due to exile to provide better clinical support for these groups (Rosbrook & Schweitzer, 2010). Karen and Chin refugees described home as a place of psychological safety and strong social connection (Rosbrook & Schweitzer, 2010). Understanding the meaning that a client attributes to losing his or her home can help a clinician normalize rather than pathologize the psychological
effects of such a loss (Papadopoulos, 2002; Rosbrook & Schweitzer, 2010). This approach does not abandon diagnosis, but rather incorporates cultural values to promote contextually meaningful treatment.

**Rationale for the Current Study**

Although the extant literature has highlighted unique stressors associated with refugees’ premigration and postmigration experiences, psychologists should avoid overgeneralizing refugees’ mental health concerns and, instead, examine the unique contexts of specific refugee groups. Likewise, psychologists should consider cultural factors to minimize the possibility of misdiagnosing refugee individuals. In fact, misdiagnosis has been a significant concern among Southeast Asian refugees (Sonethavilay, Miyabayashi, Komori, Onimaru, & Washio, 2011). The best clinical practices with refugee populations should simultaneously account for symptoms and contexts, and require an in depth understanding of refugees’ lived experiences and cultural milieus (Murray et al., 2010). Knowing the phenomenology of these stressful experiences assists clinicians in understanding how symptoms manifest and are experienced by their refugee clients. Thus, the purpose of this study was to use a descriptive phenomenological approach to explore the meanings Karen refugees ascribed to the pre-resettlement stressors they experienced as a result of the civil war in Myanmar.

**Method**

This study aimed to explore the contextualized meanings Karen refugees ascribed to pre-resettlement stressors, using a phenomenological approach. Phenomenology, with its emphasis on understanding the meanings that people give to their lived experiences (Giorgi, 2009; Wertz, 2005), is epistemologically grounded in understanding unique experiences rather than promoting universality. A context-promoting method is necessary given this study’s emphasis on Karen peoples’ lived experiences of forced migration. We used the phenomenological method to explore Karen refugees’ constructed meanings of pre-resettlement stressors and promote attention to how unique cultural and individual meaning making can be useful in understanding this community’s psychological needs.

**Phenomenological Approach**

The current study used Giorgi’s descriptive phenomenological approach to research in psychology (Giorgi, 2009). Phenomenological research, based
on Husserl’s phenomenological philosophy, aims to understand individuals’ consciousness and perceptions of specific lived experiences (Finlay, 2014; Giorgi, 2009). The descriptive phenomenological approach assumes that individuals’ consciously expressed experiences, when considered openly by a researcher, can be interpreted using imaginative variation (Giorgi, 2009). Imaginative variation is the process of interpreting the meaning of participants’ conscious expressions (Finlay, 2014; Giorgi, 2009). Focusing on individuals’ consciously expressed lived experiences requires attention to the meanings individuals ascribe to those experiences. Researchers utilizing a phenomenological approach must adopt an attitude of openness and curiosity (Finlay, 2014) that synthesizes the phenomenology (i.e., meaning of an experience), the psychology, and the content of participants’ conscious expressions (Giorgi, 2009). The phenomenological attitude and imaginative variation facilitate researchers’ understanding of participants’ lived experiences (Finlay, 2014; Giorgi, 2009; Wertz, 2005).

Descriptive phenomenology was a well-suited method for exploring the richness and complexity of Karen refugees’ pre-resettlement stressors. In the current study, we examined and interpreted the meanings that participants attributed to pre-resettlement stressors as well as the context in which those meanings were developed. Understanding participants’ experiences required attention to difficult descriptions of strife, violence, and oppression. Though the participants’ experiences may be difficult for some to read, the lived experiences of those involved in this study are conveyed as clearly as possible to maintain the integrity of the stories they shared.

**Participants**

Karen refugees living in a midsized, Midwestern city were recruited through the assistance of a community gatekeeper. Six participants, four men and two women ranging in age from 25 to 64, were selected to participate in semi-structured interviews. Five interviews were conducted in English and one was conducted in the Karen language (i.e., a dialect within the Karenic language family) by a translator formally trained to work in medical and psychiatric settings.

We relied on the community gatekeeper’s expertise to select participants who had endured diverse stressors, including exposure to violence and social oppression. The experiences of the participants varied, with some reporting stressful experiences in refugee camps, some recalling experiences primarily in Burma, and others recounting stressors occurring outside the refugee camps while fleeing Burma. Burma is used in reference to the home of the
participants, rather than Myanmar, as this was the phrasing each participant used during data collection. Because the name of the country carries political connotations, we chose to use Myanmar in the introduction of this research to align with international politics and Burma when discussing the participants’ descriptions of their lived experiences.

**Procedure**

Our research team consisted of two women and one man. Two members identified as non-Latino White, with one identifying as a second-generation immigrant; the third member identified as a second-generation immigrant and South Asian American. As such, we did not share the Karen refugees’ migratory and resettlement experiences, which makes us outsiders to their very personal, and often difficult, lived experiences. We had little knowledge of the factual experiences the Karen had endured aside from historical accounts of the civil war in Myanmar. Our outsider status does not preclude us from interpreting the data, but being aware of this status is important in understanding the phenomenon (Dwyer & Buckle, 2009).

Although researchers can never entirely transcend bias in phenomenological research (Finlay, 2008, 2014), recognizing our biases helped us determine how our preconceived beliefs about refugee mental health and Karen refugees’ pre-resettlement experiences might influence our data interpretation. Consistent with the descriptive phenomenological method, we began the study by engaging in the epoché process (Finlay, 2008; Giorgi, 2009; Wertz, 2005) to explore our own personal biases and preconceived notions about the meanings that oppressed groups may ascribe to their pre-resettlement experiences. We met as a research team to collectively discuss our backgrounds, perceptions, and biases about what psychological needs might be prominent among refugees. This exercise was partially informed by our respective training and experiences in counseling psychology. For example, we discussed how our preconceived notions of the psychological implications of traumatic experiences could influence our transformation of meaning units. We also discussed our beliefs about refugees’ resettlement experiences (e.g., concerns related to employment and the pursuit of desired careers). This dialogue helped us minimize our clinical interpretations of participants’ responses to psychologically sensitive questions.

Following the epoché process, we created a semistructured interview protocol that was subsequently reviewed by a professional working in a nonprofit organization that assists Karen and other refugee groups in the resettlement process. This professional provided feedback regarding the wording and cultural utility of our questions, which we integrated into the
final version of our interview protocol. Questions included “What happened when you had to leave Burma?”, “Why do you think that experience happened?”, “What do you remember most about your experience?”, “How did your life change after these events?”, and “How did this affect significant others in your life?” Follow-up questions were uniquely tailored to each participant based on his or her account of experiences (e.g., “What was it like for you to have him taken away and put in prison?” and “Can you tell me a little more about walking through the jungle and what that was like?”) All interviews were conducted by the first two authors of this study except for the interview that was co-facilitated by the trained translator. Each interview was transcribed; however, for the interview conducted with a translator, we relied upon the English translations to construct the transcript. All participants were individually interviewed in locations of their own choosing to facilitate their comfort with the interview process. Interviews for five of the participants were held in their homes and one was held at a local community college. Interviews were audio-recorded with participants’ consent and lasted between 40 and 120 min.

Data Analysis

Prior to data analysis, we reengaged in the epoché process to remind us of our biases. The data consisted of more than 7 hours of recorded interviews, which were transcribed into 46 single-spaced pages of written dialogue. Team members individually reviewed each transcription with attention to a “sense of the whole” experience, or the entirety of participants’ interview responses (Giorgi, 2009, p. 128). The first two authors then analyzed the transcripts individually to determine the meaningful statements (meaning units) about the phenomenon in each transcription. According to Giorgi (2009), meaning units are “parts” of a participant’s description of a phenomenon; these “parts” are pertinent to the overall goal of the research but represent a unique component of the participant’s experience. Next, participants’ statements deemed meaningful to the phenomenon were interpreted into phenomenologically sensitive meaning units. Agreement on meaning unit identification and interpretation were high for both researchers. Interpretive disagreements were discussed until consensus was established.

The first two authors then conducted thematic analysis through imaginative variation by grouping similar meaning units into themes, or what Giorgi (2009) called the “constituents” of a phenomenon. Four themes were identified independently and then agreed upon by the two researchers. Finally, themes were used to construct a narrative description of the essence of the phenomenon, which is a pivotal step in descriptive phenomenological
analysis (Finlay, 2014; Giorgi, 2009; Wertz, 2005). The analysis of participants’ interviews led our research team to believe that appropriate saturation had been achieved according to the standards of phenomenological research (Wertz, 2005).

Two verification steps were conducted to establish the credibility of the data interpretations (Creswell, 2013). Specifically, we utilized triangulation to ensure that our findings were consistent with notes we kept during interviews and with the relevant psychological literature. Notes were not used as data but as a point of comparison between analyses and initial reactions. A qualitative audit (Creswell, 2013), conducted by the third author, was implemented to verify all levels of analysis. All data were provided to the auditor, and she engaged in the same process of phenomenological analysis. She then provided her feedback to improve the findings and clarify the psychological implications of the thematic analysis. In particular, we revised the narrative for one theme (resignation and acceptance in a context of regular violence) to more adequately capture the psychological experiences that the participants conveyed in interviews.

**Results**

Our analysis resulted in 286 significant statements with an average of just over 57 statements per interview. Each statement was transformed into a phenomenological, psychologically sensitive meaning unit. For example, the following statement was identified as significant in one participant’s interview: “Over there we don’t get anything in our life even if we live in the camp.” This statement was then transformed into the following meaning unit: “Conditions of life, before and in the refugee camp, meant she could not make her own choices.” All transformed meaning units were grouped into four themes: (a) Loss From Oppression, (b) Resignation and Acceptance in a Context of Regular Violence, (c) Ongoing Insecurity While Confined in Camps, and (d) Redefined Selfhood. All participants contributed to each of the themes, though not necessarily with equal frequency. Finally, the identified themes were synthesized to capture the essence of pre-resettlement stressors for Karen refugees.

**The Loss From Oppression**

Loss was common across participants but was defined in numerous ways. Throughout their experiences, the Karen participants endured loss of life, resources, independence, and religion. Many had to “build a new life” after having their homes and possessions taken away. For participants in this study,
much of the need to leave Burma, often for refugee camps in Thailand, was accompanied by the loss of family members or the destruction of their home and village by Burmese soldiers. Having their villages destroyed, and often burned, reflects the intense nature of the Burmese discrimination against the Karen. By “[burning] up everything,” participants felt that the Burmese government exerted dominance over them. Some participants also lost farmland and the ability to hunt, which required them to make significant lifestyle changes: “My brother ... used to be a farmer,” but because he and other Karen lost their land, they “have nothing to do. Just [drink].” Some participants’ family members were imprisoned without reason: “My father, he didn’t do anything. Why [did] they [take] my father to the prison?” Others lost parents in various attacks on their villages: “My father was killed in the attack,” and “the next summer ... my mother was also killed at that time.” Losing their homes and family members meant something greater for the participants. Home was a place of comfort and representative of traditional ways of life that were important to Karen participants, with many reporting that they knew people who wanted to return to their homes in southeastern Myanmar despite the ever-present danger. Participants who lost their homes and families felt they had lost a sense of place and an anchor to what mattered most to them. Deprived of home, family, and normal activities, many participants felt lost. One participant described Karen people’s loss during forced relocation: “We have lost very much [and] most people have run across the border.”

**Resignation and Acceptance in a Context of Regular Violence**

Exposure to constant violence and loss made participants feel that they lacked control over their situation. One participant felt the warfare was akin to genocide: “They call it genocide. They want to kill all the Karen people.” Another echoed this sentiment, stating that he felt the Burmese “[didn’t] want the other ethnicities to live with them.” Such targeting of Karen and other ethnic groups by the Burmese military was met with confusion and questioning: “I had a feeling, a feeling that the Burmese military government ... they want to disappear our people. Why don’t they like us?” In addition to the ethnic-based violence, the participants were dehumanized by Burmese soldiers who “force[d] people ... they [tried] to rape [Karen] people like [they were] animal[s].” All participants conveyed experiences of violence, attack, and imprisonment that left them feeling hopeless, powerless, and resigned to accept this way of life.

The constant prejudicial attitudes and violence experienced by the Karen made many participants hopeless. Some participants believed that death was
the only answer and some were left wondering, “When are we going to die?” One participant reflected on her future death:

I felt like an animal because if the [Burmese soldiers] caught us they will do whatever they want [to us]. So, [all] my life, I felt like [an] animal. I felt like I [should] die already and be born in a new life or something like that.

Because the Burmese military could do “whatever they felt,” the Karen participants lost any hopes they held in political processes or diplomatic means of addressing independence. Those who did speak against the ruling regime were persecuted. With regard to an encounter between students and the Burmese military in 1988, one participant recalled, “The government, you know, they killed the students [who were protesting].” Another participant remembered, “They [caught] a lot of people to put into the prison.” For him, arrests for dissent from the Burmese government were “why we [were] scared.” Further, those affected could not openly disagree: “If you [disagree with] the city or state or country, the whole country, they took you and put you into the prison. Sometimes, they shot you.” Overall, the participants felt they could not fight back, as that meant further persecution. Feeling that they could not do anything to change their situation, participants experienced a psychological state of immobility that they had no choice but to accept.

**Ongoing Insecurity While Confined in Camps**

Five of the six participants in this study migrated directly from Burma to refugee camps in Thailand. Many of the participants hoped that escaping a context fraught with violence would bring them a greater sense of safety. However, they experienced continued distress and vulnerability, a lack of resources, and a sense of isolation while confined to refugee camps. One participant expressed,

You know [in Burma], when the Burmese [soldiers] are coming, we can normally hide in the jungle for [a] week or month till they go back or they go the other way. But in the refugee camp, we have no other place to go ... In the camp, we are not free.

Although some participants expected their lives would be improved away from war, the refugee camps offered little enrichment. One participant stated, “[the Karen] will live and die over there [in camps], and we will learn nothing ... that was a very difficult time in the camp.” According to the participants,
the camps offered minimal resources and protection, as the Burmese military continued to attack the Karen who had sought refuge there.

Many participants felt that living in the camps limited their independence. One participant, who “grew up in a small community with poor education and with poor health,” described “the education level as very low,” which left the Karen refugees at a disadvantage in the camp. In addition to poor education, many participants experienced a lack of empowerment or agency to access or work for their basic needs. One participant explained, “[We had] to wait for our food. We [could] not … go outside and work for our income,” which meant they were left waiting for aid. Another participant compared the abundance of resources he was able to obtain in the United States with the lack of resources available in his camp: “There’s more available in the [United] States. Here you have teachers and opportunities … [in the camp, we] have the food problem. We cannot compare with the United States.” The refugee camp was a place without opportunity for one participant: “When you come [to the camp], like a couple years, it’s a struggle. Whatever, wherever you live it’s a struggle for life because you have no future.”

Confinement to the refugee camps also made participants feel isolated from their friends and families who were located in other camps and whom they were unable to visit. One participant described the legal restrictions that barred him from visiting his family in another camp:

We did not have [the] chance to go outside camp. We cannot visit each other. Along the Thai–Burma border there is seven, eight refugee camps. It is far [from] camp to camp. It is far so we cannot do that. We cannot [visit family or friends] because we don’t have the Thai [government’s] permission to travel.

Home and family are particularly salient in Karen culture; therefore, the experiences of separation made many participants feel disconnected. One participant explained that she was left clinging to the memory of “the beauty and the pleasure of [Burma].” For another participant, the experience of confinement and isolation from family was further complicated by a fear of imprisonment for leaving the refugee camp: “If you go outside the refugee camp, the Thai soldier[s] can capture you as an illegal person.” No safe avenue existed for participants to reconnect with their familial ties.

Although the participants had escaped the violence in Burma, minimal resources and regular attacks in the Thai refugee camps left many experiencing insecurity in the same camps that were meant to be a refuge from war. Camp life and the imposed inability to evade despair was an experience that one participant hoped to forget: “When I was in the camp, it was a dream. It was a very
long time, but it’s like a dream and ... I don’t want to think about that.” This participant and others endured unexpected hardship when living in camps, such that it may be considered a time in life some participants view as best forgotten.

**Redefined Selfhood**

Having lived in a context of war and oppression, the participants in this study expressed several ways in which their self-concepts and behaviors changed as a result of their limited self-determination and being forced into exile. One participant experienced a lack of control as a result of living without basic human rights, “We do not have the rights, you know what I mean? We do not have the rights”; this left him feeling subservient to the oppressive Burmese regime. Another participant described the Karen as a “third world people,” and expressed fear that the Karen would never rise above this status: “We will finish [the whole of our life] here. Even the next generation will finish here. So the whole of our people will never reach our goal [of bettering our lives in our homes].” Others internalized their oppressed status while struggling to survive, such as one participant who was initially denied refugee status and risked his life while living illegally in Thailand. As a result, he was frequently taken advantage of when seeking employment and felt that all Karen people “had to struggle for [their] lives.” A lack of control, an ongoing struggle, and a foregone conclusion that future Karen generations will end in refugee camps demonstrate a reconstructed sense of selfhood. The Karen people no longer saw themselves as capable of growth. Instead, the participants developed a sense that they were unworthy of pursuing goals or desires in life because their rights were taken.

The participants in this study reported that they viewed themselves as weak as a result of the systemic oppression that the Karen people experienced, including limited access to education. More specifically, the participants believed that the Burmese government exercised control over the Karen by barring them from getting an education. One participant explained that the schools that were available to the Karen were often destroyed: “[Whenever] we build a school, [Burmese soldiers will] destroy the school. They destroy every school that they wish” because “[the Burmese] don’t want our people to be educated.” Another participant expressed, “[Karen] still feel weak [from] our experiences in Burma and Thailand because we are not educated people.” As such, the participants felt inadequate and inherently inferior to the Burmese. These experiences are naturally related to a sense of loss, but participants used this lack of education to define weakness in the Karen. Although they may have once been self-determined, losing any sense of agency led to the internalization of weakness as a way of understanding who the Karen are as a people.
Although some participants felt inferior as a result of the oppression they experienced, others viewed the persistent discrimination and violence as an opportunity to help their people. One participant reflected on his experiences as a child after his father was killed by the Burmese, stating that he thought, “When I grow up I can be a soldier in the Karen [army]. Maybe I can fight in the battle. That reminds me of when I was young and how I feel when my father died.” This participant eventually became a teacher in his Thai refugee camp to engender hope for younger generations of the Karen. Other participants reacted to the oppression they experienced with a desire to physically defend the Karen people. In spite of the discrimination, many participants felt compelled to act to improve the lives of the Karen people.

Ultimately, the participants’ self-perceptions were influenced by their pre-resettlement stressors, including exposure to war, loss of family and homes, and insecurity in refugee camps. The impact of the pre-resettlement stress was evident in how the participants came to view themselves as either a third world person or an individual who could help shape the future of the Karen. Despite different reactions, participants’ meanings of themselves were formed within the context of their stressful lived experiences. Taken as a whole, these pre-resettlement stressors meant to participants that they were somehow incapable, unimportant, and set up to fail.

**Essence: The Phenomenology of Karen Pre-Resettlement Stressors**

Pre-resettlement stress has had a wide-ranging impact on Karen refugees. The Karen people experienced extensive losses as a result of being forced from their homelands. Many witnessed the deaths of family members and the destruction of their communities. Within the context of this devastation, the Karen felt that the Burmese soldiers treated them as animals rather than humans, and as a group to be exterminated. The Burmese government’s control over the Karen created a context in which violence and warfare were routine for the Karen. As such, a sense of fear was experienced by the participants in this study. This sense of fear persisted for many of the participants who left Burma for refugee camps in Thailand, as attacks on the camps were common. Experiences of oppression in the refugee camps, including the assassinations of religious leaders and the limited access to resources and education, further perpetuated participants’ feelings of fear, hopelessness, and dependency. Despite these experiences, several participants felt compelled to help future generations of Karen people being impacted by the Burmese oppression. The stressors the participants endured will not soon fade from their memories, as one participant eloquently described her camp life as a dream best forgotten.
Although the participants hoped some memories would fade, they still held on to thoughts about the beauty of home.

**Discussion**

The purpose of this study was to explore the meanings Karen refugees ascribed to stressful pre-resettlement experiences. Given that the Karen refugees in this study had endured a longstanding civil war and forced displacement (Core, 2009), our goal as researchers was to better understand how our participants had defined their experiences, and the meaning they ascribed to them. This understanding may help psychologists conceptualize psychological vulnerability and enhance mental health services for this population.

When considering the psychological implications of pre-resettlement stressors for refugees, it is important for psychologists to examine within-group experiences. The meanings that individuals ascribe to stressful experiences are often influenced by cultural contexts. Therefore, psychological treatments for refugees like the Karen may be more effective if clinicians attend to the unique meanings their clients attribute to stressful experiences (Gusman et al., 1996). For example, participants attributed unique meanings to the psychologically troublesome experience of losing their homes and lifestyles (loss from oppression). For many participants, and consistent with other research (Rosbrook & Schweitzer, 2010), home represented psychological safety and social interconnectedness. As such, clinicians who understand the significance of home and family for Karen people will be better equipped to assess and address Karen refugee clients’ psychological symptoms from a culturally sensitive perspective (Gusman et al., 1996; Marsella et al., 1996; Schweitzer, Greenslade, & Kagee, 2007). Clinicians’ empathic recognition of their clients’ culturally and individually significant meanings may also help foster strong therapeutic alliances that promote change.

The findings in this study also revealed that participants experienced altered self-perceptions as a result of pre-resettlement stressors. Moshman (2011) argued that exposure to oppression, genocide, and group violence may destroy and manipulate an individual’s identity. Participants in this study came to view themselves as inferior, “third world people.” Negative internalizations of the self as a result of living in a state of subjugation has also been found among individuals in other historical contexts of oppression, such as Nigeria (Okolie, 2003) and Namibia (Bartholomew, 2012). Attending to negative self-representations and pre-resettlement stressors among Karen refugees is especially relevant for counseling psychologists, as the field of counseling psychology emphasizes the incorporation of social justice in training and practice (Speight & Vera, 2008; Toporek, Gerstein, Fouad, Roysircar, &
Israel, 2006; Vera & Speight, 2003). For example, psychologists working with Karen refugees can use culturally oriented psychotherapies to help their clients process internalizations of oppression. Therapists can also use collaborative narrative reconstruction to help refugee clients identify positive aspects of their pre-resettlement experiences, such as the resilience necessary to overcome strife (Schweitzer et al., 2007). In this way, intervention strategies may be crafted for Karen refugees who opt to seek care and remain relevant to those seeking change. Providing useful services to Karen refugees may also require counseling psychologists to extend beyond providing individual and group therapy to adopting advocacy roles in refugee communities.

Although we only explored the meanings participants derived from pre-resettlement stressors, the intersection of pre- and post-resettlement factors should be considered. More specifically, psychological vulnerabilities stemming from pre-resettlement experiences may exacerbate the distress and degree of impairment refugees experience during resettlement (Yakushko, Watson, & Thompson, 2008). Refugees frequently experience resettlement concerns related to unemployment, separation from their families, and poor social integration (Schweitzer et al., 2011; Teodorescu et al., 2012). Research involving psychiatric outpatient refugees in Norway demonstrated that these concerns as well as other postmigratory factors contributed to higher levels of symptom distress (Teodorescu et al., 2012). Similar findings emerged among a sample of Sudanese refugees for whom a lack of ethnic group support predicted greater levels of PTSD, anxiety, and somatization (Schweitzer, Melville, Steel, & Lacherez, 2006). Postmigratory and resettlement distress may not dissipate over time for some refugee groups (Tran et al., 2007). Thus, clinicians working with refugee clients may benefit from exploring pre- and post-resettlement experiences to better understand the extent of their client’s distress (Ying, 2001). Attending to pre-resettlement stressors in therapy will help clinicians “account [for] the beliefs, perspectives and values” of their refugee clients (Schweitzer et al., 2007, p. 286). For example, a Karen refugee client who views himself or herself as a “third world person” may struggle with acculturation and social integration, which may contribute to psychological distress (e.g., Teodorescu et al., 2012). Although not examined in this study, Karen refugees may experience resettlement distress that is amplified by their pre-resettlement experiences.

Limitations

The current study had several limitations. First, though our sample provided quality data that allowed us to reach adequate saturation for phenomenological inquiry (Wertz, 2005), the sample size precluded us from generalizing
the findings to the broader Karen refugee community. However, qualitative research is not typically concerned with the generalizability of research findings. More research with Karen people is needed to adequately assess the applicability of our findings and pre-resettlement stressors for this group. Second, qualitative analysis is bound to the biases of the researchers interpreting the data. Although phenomenological inquiry requires researchers to attend to their biases, these biases cannot be transcended. We discussed our biases throughout the analytic process and worked to develop thematic narratives that accurately reflected the participants’ lived experiences. However, none of the researchers involved in this study shared the cultural perspectives or experiences of the Karen participants. As such, our inherent differences and biases should be considered when interpreting the findings in this study. Finally, one interview was facilitated by a professional translator, which may have influenced the findings derived from this interview. Specifically, we were unable to translate and back-translate this interview; thus, we had to rely upon the English translations made by the professional translator. This may have resulted in some lost meaning in the natural expression of the participant. Future research should explore the impact of resettlement, traumatic experiences, and psychological vulnerabilities among Karen people as well as Karen peoples’ perceptions of counseling as a culturally appropriate means of psychological healing.

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