Exploring the Barriers and Opportunities for Building Social Support Among Burundians and Americans: Dayton, OH

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Exploring the Barriers and Opportunities for Building Social Support among Burundians and Americans: Dayton, OH

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June, 2012

Culminating Experience
Acknowledgements

There are so many people I would like to thank for their generosity and support throughout the process of conducting this fieldwork. I am so grateful to my advisors, Dr. Cristina Redko and Dr. Jacqueline Housel for their patience and encouragement to guide this research and push it to the next level. I would also like to thank the Burundian community, the Burundian Cultural and Education Association, Project Congo, The Hands Art Work Project and all of the many supporters in Dayton who trusted me to be part of their lives and work. I am so incredibly grateful to the precious research team at Kozmetsky Global Collaboratory at Stanford University for always encouraging me and others to trust ourselves and the many gifts within. I would especially like to thank Dr. Syed Shariq and Dr. Bhavna Hariharan for their unconditional care and trust in me and in this work. I would also like to thank Tom Wahlrab, recently retired from the Human Relations Council, for his calm leadership in creating the “Welcome Dayton” plan to make Dayton a city friendly to all those from around the world who now call this great city “home”. Welcome Dayton contributes toward the ecology that makes the research and work I am doing more possible. Thank you to the Ethnic and Cultural Diversity Caucus for generously sharing their data and interviews for this project. I would like to thank Dr. Jessica Goodkind for her research with the Refugee Well-Being Project and for her initial feedback and encouragement for this project. Finally, and with great joy, I acknowledge my incredible family. None of this would have been possible without the tireless support of each person, including my two children, Abbie and Oliver and to my mother and my sister for countless babysitting hours. Finally I thank my husband for his clear and patient feedback and always supporting me through the many twists and turns of this work.
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Exploring the Barriers and Opportunities for Building Social Support among Burundians and Americans: Dayton, OH

Forcibly displaced families are at great risk for a host of serious health problems, including violence, traumatic grief, depression and severe anxiety (Miller & Rasco, 2004; Mollica, 2006; Stepakoff et al., 2006; Kirmayer et al., 2010; Fazel, Reed, Panter-Brick, & Stein, 2011). The violence causing displacement, as well as the many trials faced by refugees in the resettlement process are largely responsible for ensuing health problems (Miller & Rasmussen, 2010; Gorst-Unsworth & Goldenberg, 1998; Lavik, Hauff, Skrondal, & Solberg, 1996; Pernice & Brook, 1996; Porter & Haslam, 2005, Silove, Sinnerbrink, Field, Manicavasagar, & Steel, 1997; Kirmayer et al., 2010). Among the many determinants that have been shown to damage or protect health in resettling refugee populations is the quality of social support experienced in resettlement and integration into the new homeland (Shaw, Dorling, & Smith, 2006; Miller & Rasco, 2004; Fazel et al., 2011; Kirmayer et al., 2010; Goodkind, 2006; Goodkind, Githinji, & Isakson, 2011). Families enduring forced migration have lost their social connections, social roles, sense of belongingness (Baumeister & Leary, 1995; Strang & Ager, 2010), and support network, all of which are fundamental human needs and particularly vital to families and youth trying to integrate into a new society following displacement and trauma (Shaw et al., 2006; Fazel et al., 2011; Kirmayer et al., 2010). If left unaddressed, the disappearance of this social tapestry has long lasting ill effects on the physical, emotional and mental health of refugees (Miller & Rasco, 2004; Kirmayer et al., 2010).

The reigning paradigm for integrating refugees in the United States remains solidly focused on addressing physical and material needs, not yet officially including social and emotional health (U.S. Committee for Refugees and Immigrants, 2007; Ohio Department of Job
and Family Services, 2006; MacKim, 2010). Meanwhile, several researchers have discovered effective practices for building social support that offer local resettlement agencies and communities methods for addressing emotional and mental health of displaced persons (Goodkind et al., 2011; Goodkind, 2006; Mollica, 2006; Stepakoff et al., 2006). The findings of these researchers demonstrate that in order to achieve the goals of integration, the physical, social, emotional and mental health of displaced individuals, communities and families must be addressed (Miller & Rasco, 2004; Miller & Rasmussen, 2010). Building upon this existing research, this project investigates the case of Burundian refugees in Dayton, Ohio in order to contribute towards the improvement of successful and sustainable integration.

Dayton Ohio is home to many resettling refugees. The Burundian refugee community in particular has received much local attention for the many challenges the community has faced in adjusting to life in the US. After a 35 year stay (1972-2007/8) in Tanzanian refugee camps following a 1972 civil war in Burundi, the Burundian refugees had survived for three decades in camps, hemmed in from the outside world, subsisting largely on United Nations High Commission for Refugees (UNHCR) aid and small scale agriculture. With a 20% literacy rate, fewer than 40% receiving primary education (Cultural Orientation Resource Center, 2007), and little exposure to life outside the camps, the Burundians arrived with few skills that match the demands of an industrialized economy and English-speaking society. Given these challenges, local organizations and churches have expended a great deal of resources to support this population and yet many of the Burundian families continue to survive largely on public and charitable assistance, falling short of the resettlement goals of self-sufficiency and integration. Meanwhile, some supportive efforts became so rife with interpersonal constraints between Burundians and community supporters that the efforts were terminated. It remains critical to
understand the nature of these interpersonal tensions in order to understand how relationships may be mended and collaboration may continue in the future. This study suggests that “mutual learning” and understanding, found to be a foundation of sound social support relationships (Goodkind et al., 2011; Goodkind, 2006; Goodkind, 2008) offer great opportunities to Burundians and Daytonians for building social support, a necessary ingredient for the long-term health of the Burundians in Dayton.

As such, this study examines the landscape of relationships between Burundians and Daytonians including barriers to social support and opportunities for building social support. Specifically, the study looks at several key barriers in forming social support relationships, including distrust, fear, limited perception of the other and the unsustainable quality of unidirectional “help”. In addition, the study examines best practices in forming social support, including practices of mutual learning between Burundians and Daytonians. Such practices are most effective when the Daytonians and others work with the Burundians in places, times and practices in which the Burundians feel most comfortable, such as sharing tea in someone’s home, greeting people in Kirundi (native language of the Burundians) in the neighborhood or attending community led events and meetings.

**Literature Review**

In studying the Burundian community in Dayton, it became critical to understand why and how integration and self-sufficiency, as the twin goals of US refugee resettlement, appeared to be faltering. Despite the efforts of Catholic Social Services (CSS) and many other local organizations, few of the Burundian families were economically self-sufficient after three years in the US and few could be considered well integrated. From a public health point of view, such faltering indicates that the Burundian community is at risk for long-term mental, emotional and
even physical health problems (Shaw et al., 2006; Miller & Rasmussen, 2010). Examining the literature on refugee health and resettlement clarifies what risk factors threaten refugee health as well as what key areas of opportunity and existing practices may contribute toward sustainable health of the Burundian community in Dayton. This section begins with a review of literature on the health of refugees, followed by examination of literature in social determinants of health, particularly social support, and finally looks into existing models that present opportunities for building social support as one helpful addition to the efforts in creating sustained health of refugee communities. The subsequent sections of this paper look specifically at the case of Burundian refugees in Dayton, using the social support framework presented here, to understand the barriers and opportunities for social support surrounding this specific population.

In the literature on refugee health, there are a great many risk and protective factors identified as harmful or helpful for the health of refugees. There are various schools of thought on addressing health issues specific to these populations. Some researchers focus on the aftermath of trauma and advocate for clinical interventions to treat acute mental health disorders, such as post-traumatic stress disorder (Neuner & Elbert, 2007). Refugee resettlement programs have increased resources to address mental health needs, as well as boost resources available for all physical and material needs of incoming refugees in the United States (Ohio Department of Job and Family Services, 2008; MacKim, 2008). Meanwhile, the “daily stressors” faced by displaced people is an emerging focus in the field of refugee health, gaining attention as a necessary supplement to the current efforts underway in resettlement (Miller & Rasmussen, 2010; Miller & Rasco, 2004; Mollica, 2006). Indeed, the trauma endured before and during displacement, as well as resettlement stressors, all threaten the health of individuals, families and communities who have been forcibly displaced (Miller & Rasmussen, 2010; Miller & Rasco,
Studies have shown that while trauma is a difficult aspect of resettling, most refugees have shown remarkable resistance (Mollica, 2006; Kirmayer et al., 2010; Miller & Rasmussen, 2010). And yet the “daily stressors” that follow displacement are so taxing to the health of refugees because they present direct and immediate challenges to people each day and these stressors are typically beyond the control of the refugees (Miller & Rasmussen, 2010). For example, the stress of speaking a foreign language to meet daily needs can be appreciatively taxing, especially when conflated with past trauma, poverty, social exclusion and the many other stressors found present in the lives of refugees.

These resettlement stressors including loss of social networks, social isolation, poverty, discrimination, lack of environmental mastery, separation from loved ones and intergenerational disparities in adjusting to a new life (Miller & Rasco, 2004; Shaw et al., 2006; Pottie et al., 2011) continue threatening the health and well-being refugees long after the refugees have appeared to resettle in a new homeland. In the following figure, Miller and Rasco (2004) provide an overview of these post-displacement stressors or “daily stressors” that can undermine the well-being of individual, family and community health. This figure features social issues prominently in the web of risk factors for refugee health.
**Figure 1.** The Adverse Effects of Political Violence and Displacement on Individuals, Families and Communities

This figure underscores the social factors, including loss of social networks and social isolation, which figure prominently in the health risks facing displaced persons. Robust social support and social networks can offer a mitigating influence in diminishing these daily stressors. Such stressors cannot be clinically or physically treated through pharmaceutical intervention or medical treatments. Rather, ecological approaches, such as building social support, are a necessary component of public health interventions in refugee communities to truly address the wide spectrum of risk factors these populations face (Kirmayer et al., 2010; Stansfield, 2006; Wilkinson, 2006; Kelaher, Potts, & Manderson, 2001). Ecological interventions span the world.
and include efforts conducted with internally displaced people in Sierra Leone (Stepakoff et al., 2006; Hubbard & Pearson, 2004) through the Center for Victims of Trauma as well as refugee populations in the U.S. such as the Refugee Well-Being Project at the University of New Mexico (Goodkind & Deacon, 2004; Goodkind, Githinji, & Isakson, 2011). In an extensive review of refugee health literature, Kirmayer et al. (2010) found that those communities and organizations that included pre and post migration stressors along with past trauma when addressing refugee health, were able to better address the whole spectrum of health care for refugee populations. In addition, those refugee communities who benefitted from social support had improved mental health outcomes and were better equipped to deal with daily stressors such as poverty and discrimination (Kirmayer et al., 2010).

It is then helpful to turn to the literature on the social determinants of health as a body of research that deepens the understanding of health inequities in general, in particular revealing why and how social factors impact individual and community health (Marmot & Wilkinson, 2006; Stansfield, 2006). It has become evident that health runs along a social gradient, which includes not just economic factors, but also gender, age, ethnicity and status. Social determinants influence the conditions surrounding people at work, home, neighborhoods and institutions, all influencing the health of people in various ways (Marmot & Wilkinson, 2006). Social support is one facet in the literature in social determinants of health and is a particularly useful construct in looking at the health risks specific to refugee populations as this is a group whose social support networks have been all but wiped out.

While research has consistently shown the impact social networks have on health (Christakis & Fowler, 2009; Smith & Christakis, 2008), there has been a need to understand the nature of relationships within a network. Social network measurements, including the number of
contacts, frequency of contacts and density of the network, are easily measureable. Social support, while more difficult to measure, adds depth and clarity to the quality of relationships within a network (Stansfield, 2006; Berkman, Glass, Brissette, & Seeman, 2000). For example, the quality of the relationship is indicative of whether a person feels they can call upon another for assistance and camaraderie. Such support moves beyond the domain of professional help, such as the support provided by paid experts like doctors, lawyers or nurses. Rather, social support is an “advocative interpersonal process” (Finfgeld-Connett, 2005) that relies on personal connection, trust, mutuality, cooperation and understanding, in addition to material support. Supporters advocate for the recipient within an “atmosphere of unconditional positive regard and caring” (Coffman & Ray, 1999; Sandstrom, 1996).

Dr. Finfgeld-Connett (2005) offers a helpful diagram of social support as a fluid and evolving process, as opposed to a stationary service. In order for social support to offer healing and value to an individual or community, there is a web of factors that must work together. If any of these factors are absent, the process of social support will not be as sustainable, valuable or effective. Particularly helpful in Finfgeld-Connett’s diagram are the attributes of social support that she illustrates as foundational to the process of support. These attributes emphasize the interpersonal and reciprocal qualities necessary for a functional support system.
Finfgeld-Connett’s graph illustrates the critical mechanism underlying social support as the interactional nature of the relationship (Stansfield, 2006; Stewart et al., 2008). Social support has been consistently shown as sustainable and protective of health only as a mutual interaction, not a unidirectional transaction (Stansfield, 2006). Among adults, support is not professional in nature, but rather consists of trusting interactions among equals (Finfgeld-Connett, 2005). Reciprocity and mutuality, as such, are critical to the success and strength of support, regardless of the quantity of practical support given (Finfgeld-Connett, 2005). What one contributes to support relationships may be as much a conduit for good health as what one receives (Stansfield, 2006).
Upon this foundation, social support consists of instrumental/practical support, or the “resources provided by other people” (Cohen & Syme, 1985), and emotional support, or “the information leading the subject to believe that he is cared for and loved, esteemed, and a member of a network of mutual obligations” (Cobb 1976). As such, practical support includes material and financial resources directly given or accessible to an individual while emotional support manifests as information given to a person to help that person solve his or her problems. Emotional support also includes any interrelating that boosts the “self-appraisal” of the recipient. In other words, it is emotional support that may help a person feel they are unconditionally valued, cared for and capable within a network of relationships. Such beliefs are a core component of social support. As such, perception is a key factor in social support, particularly whether one believes they are or are not receiving social support. Regardless of how much practical and emotional support one is offered, the perception of that support is a critical factor in how the support is accepted and understood (Stansfield, 2006). If an individual feels the support is conditional or unreliable, she may not feel trust in the support offered (Finfgeld-Connett, 2005).

Social support exists within a larger tapestry of social determinants of health, all of which are important to consider when studying highly vulnerable populations like refugees. When it comes to populations that live on the edge of economic, civic and social activity, including refugees, it is critical to note the heightened experiences of isolation and social exclusion that have a great impact on health (Wilkinson, 2006; Shaw et al., 2006). Most notably, if there is a great deal of support and cohesion within a vulnerable community, the community may still lack social support from the broader community, where many resources and opportunities may lie. Refugee populations resettling in new countries are particularly vulnerable to feelings of
isolation and exclusion as they may lack the social capital to navigate and connect to communities in their new homeland (Miller & Rasco, 2004; Goodkind, 2005; Goodkind & Githinji, 2008; Dhari et al., 1997). For populations who have not been formally educated and never lived in a modernized and urban society, the challenge of accessing and participating in the workings of market economies and more impersonal and individualized societies may be an added barrier to forging supportive relationships (Malkki, 1995; Donald, 1991; North, 2004). Social support, thus, may be both particularly critical to the health of resettling populations while also particularly elusive.

Indeed, in low socioeconomic communities, social support has been found to be a particularly strong antidote to the toxic stress caused by living in poverty (Adler & Stewart, 2010; Gorst-Unsworth & Goldenberg, 1998). In such communities, many health researchers are now emphasizing the importance of addressing the “upstream” causes of “downstream” health issues in part through improved social support practices (Braveman, Egerter, & Williams, 2011). In other words, these researchers demonstrate the gravity of addressing risk factors, barriers to good health and social determinants of health in the present time so as to allay future health problems. Such research argues that while treating disease and health problems is critical, prevention warrants far greater attention. One key area of prevention is to adequately address the social determinants of health, including social support. In other words, before health problems emerge or worsen, communities and public health officials need to address social issues to prevent long-term health problems (Braveman, Egerter, & Williams, 2011). For refugee communities, a particularly critical area needing attention is the establishment of new supportive relationships, as the refugees’ support networks of the past have usually been erased (McMichael & Manderson, 2004). And finally, in order to fully develop the appropriate social support with a
refugee community, the community’s voice must be surfaced and understood as a critical part of the integration process (Goodkind et al., 2011; Stepakoff, 2006; Miller & Rasco, 2004; Miller & Rasmussen, 2010). It is also important to note that social support has been shown to have widely different meanings across cultures (Stewart et al., 2008; Malkki, 1992, 1995). Specifically, anthropologic studies of the Burundian refugee communities in Tanzania has shown a depth to community belief and narrative that diverge enormously from accepted discourse on what it means to be displaced, exiled and supported (Malkki 1992, 1995). It may be necessary to develop practices of understanding from the community how they view social support and what their support needs and priorities actually are (Stewart et al., 2008).

In summary, it is apparent that refugees face an array of pre- and post-displacement stressors, layered on top of the trauma causing displacement. Many of these daily stressors greatly threaten the health of displaced families and communities. Many of the daily stressors are social in nature. Literature on social determinants of health, specifically social support, offer a substantial body of research showing that not only are social determinants a forceful cause of “downstream” health issues, but also strike particularly hard on vulnerable populations, like refugees. Social support has consistently proven to protect and improve the longevity and well-being of people and yet refugee populations access to support is severely truncated upon displacement and resettlement.

This study investigated the quality of social support surrounding Burundians in Dayton and has found that focusing on improving social support is an area of opportunity in preventing “downstream” health issues for this community. Herein, the field of community psychology offers insights into the practices that can be built upon to build and sustain social support networks (Goodkind, 2005; Goodkind et al., 2011; Doron, 2005; Miller & Rasco, 2004; Hubbard
& Pearson, 2004; Stepakoff et al., 2006; Minkler & Wallerstein, 2003). Ecological practices have found that effective approaches work within existing activities of the community, prioritize prevention, listen to the concerns voiced by the people themselves, include the people’s values and beliefs, and emphasize building people’s capacity, rather than exclusively treating the people’s ills (Trickett, 1996, 2009; Rappaport, 1981; Freire, 1970; Kelly, 2006; Thomas-Slayter, 2009; Goodkind & Deacon, 2004; Belenky, Bond, & Weinstock, 1999). In the case of Burundians in Dayton this would mean that rather than look exclusively at what the Burundians need to learn in the US, such as English and clock time, supporters would focus on discovering existing capacities, thereby not only connecting to what the people know, but also validating the skills and experiences of the Burundian people. Such validation is part of a mental health process that recognizes and learns from the past experience and present abilities of the people. Attention to existing capacity allows Daytonian supporters to better understand and work with the Burundians. Further this approach facilitates the possibility of mutual learning. Much research conducted with refugee communities shows the tremendous learning and understanding that emerges through ecological practices that seek to create settings optimal for the sustained health and well-being of the people (Goodkind, 2011). Some of these practices will be explored in this paper.

In summary, social support is a critical protective factor for the health of individuals and communities. Refugees have lost their networks of social support following forced migration. Due to trauma and violence often accompanying forced migration, as well as the stress of resettlement, refugees are at risk for many health problems. Social support has been found to be an imperative component of successful integration and sound health for refugee populations. The quality of social support must include mutual interactions and reciprocity, in tandem with
material support. And yet, developing a robust social support system is a complex endeavor. In Dayton, various programs offering extensive practical support surrounding the Burundian community. This research explores ways in which this social support sometimes faltered, as well as how the support may be strengthened as one way to improve interventions in the future.

**Methods**

The original purpose of this research was the development of a project called, Abantu Café (2010-2011) which was seeking to understand the relationship between mutual learning, health and perceptions of belonging (Goodkind & Deacon, 2004; Baumeister & Leary, 1995) among the Burundian refugee community in Dayton, Ohio. Over the course of developing the research project, I conducted many qualitative interviews and took extensive field notes as a participant observer in order to understand the local context in which the refugees lived. This ethnographic data was collected from many field visits while the project was being developed. The Wright State University Institutional Review Board (IRB) approved use of the ethnographic data. Several unexpected outcomes occurred in the field, rendering the initial project design unfeasible in the short term. However, the ethnographic data collected over the course of 18 months provides a rich picture of the social support system experienced by the Burundians in Dayton.

This research was a case where data preceded method (Richards, 2005). The project was initially designed according to specific research questions related to mutuality as a conduit to belonging and sound health among Burundian refugees, based in part on the work of Dr. Goodkind at the University of New Mexico’s Refugee Well Being Project. Yet, when the original design became impossible to continue, there remained rich data that can elucidate some of the hurdles and opportunities community supporters and the Burundian community face in
Dayton. As such, a method and framework to analyze the data emerged upon reviewing and assessing the collected information.

Data for this research was collected from several sources. For one, all interviews, conversations and field notes taken during the design and initial implementation of Abantu Café were organized and coded using Dedoose Software. These notes include interviews with eight community supporters. The interviews took the form of conversations, where the community supporters were asked about their involvement with the Burundian community as well as their sense of remaining needs, challenges and possibilities. The conversations were open allowing the community supporter to fully express their thoughts and feelings regarding their work with the Burundian population. These interviews were conducted in order to develop the design of the initial project. In addition, throughout the planning and development of Abantu Café, there were twenty field site visits either to the neighborhood where the community lives or to specific homes within the community. These provide insights into the quality of life the community members’ experience, the “assets” present within the community as well as the perceptions the community members express about social support received in Dayton.

Concurrently with the development of the Abantu Café project, faculty and students at the University of Dayton, Miami University and Wright State University were conducting interviews with community leaders as well as focus groups with various refugee populations in Dayton as part of the Ethnic and Cultural Diversity Caucus. A search for the key words “Burundi/ Burundian” within this data set revealed which focus groups and interviews commented on the Burundian population. All documents with any mention of the Burundian community were included in this research and coded identically to data I gathered in the field.
Over the course of the data collection, there were several significant examples that illustrate both the efforts to provide practical support to the Burundian community as well as the quality of interrelating that occurred within various projects. As such, the data was organized into four primary “social support events”. These events include Microenterprise, Gardening, Housing, and the Local Resettlement Landscape. All documents were named according to event, date and document type (interview, email, field notes). These events illustrate examples of social support surrounding the Burundian community.

Coding was conducted through Dedoose Software, an online, web-based coding application, specifically designed for qualitative data. For the purposes of this research, “community members” are people typically referred to as the “1972 Burundians”. Most of the families lived their entire lives in refugee camps in Tanzania before coming to the US in 2007/2008. “Community supporters”, in this research, are defined as people in Dayton who made efforts to ‘aid’ the Burundian community members. In this group, I have included three Burundian leaders who also arrived to the US as refugees or asylees but whose experience prior to the US was distinct from the community members, most notably they did not live in the Tanzanian camps their whole lives. In other words, these leaders have more capital (socially, economically) to be ‘supporters’ of the community members in the context of industrialized economy like Dayton.

Several codes were derived from research in social determinants of health (Marmot & Wilkinson, 2006), specifically “social support” as one element of social impact on health (Stansfield, 2006). For instance, codes include “perceptions of social support”, defined as the “community members” accounts of their feelings related to experiences of social support, or lack thereof. Child codes under perceptions include, “negative” perceptions, when a community
member(s) does not feel they are supported emotionally or practically; the person feels either an acute or general absence of support. The second child code under perceptions is “positive” perception, when a community member expresses feelings of being "supported" emotionally or practically, either in a specific incident or a general way. Indeed, the research shows that sometimes the perception of support is more critical than the quantifiable amount of support.

Another level of coding targeted specific examples of social support. One dimension of social support is “practical support”, meaning any form of material support, physical support, skills transfer or financial support; or a pledge of practical support. This can include things like car rides to doctor’s appointments or helping someone with taxes. A second dimension of social support is “emotional support”, which includes positive actions and/or encouragement, expressing empathy, asking questions, eliciting "self-appraisal", boosting self esteem, and helping with problem solving.

In the literature on social support, the quality of interrelating receives much attention as an indicator of how the social support will be received and perceived (Stansfield, 2006; Stewart et al., 2008). Researchers caution against seeing support as unidirectional, as this can cause imbalance in the relationship and break down the support system (Stansfield, 2006; Strang & Ager, 2010). As such, strong and sustainable support systems are about relationships, give and take, and require mutuality\(^1\) between community members and community supporters\(^2\). As such, interrelating was coded several ways. One type of relating was mutual interrelating characterized by a bidirectional, reciprocal exchange among adults where both community members and

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\(^1\) There are some exceptions in the literature. For example, parents support their children in a more unidirectional way and remain balanced. For the purposes of this research, the focus is adult relationships, where mutuality is critical to the strength and sustainability of the social support system.

\(^2\) In this sense, even the naming scheme in this research is problematic as it seems to designate some people as supporters and some as receivers of support. In fact, in a truly sustainable system, everyone involved is giving and receiving support.
supporters offer suggestions, ask questions and/or share ideas. Another type of interrelating was
tense or negative relating between community member(s) and supporter(s), which includes
gossip, negative statements about another, blame, anger, and/or violence. Finally, unidirectional
relating is when a community supporter orders, advises, commands, or demands actions from the
community member(s); when a supporter makes decisions for a community member or takes
action on behalf of community member without consultation or permission.

Finally, in analyzing the data, recurring narrative themes offered by community
supporters about community members surfaced. Ultimately, these narratives were coded as a
“deficit narrative” which offers explanations for behavior and circumstances of the ‘community
members’, colored by blame or limitations on what the Burundian community can or cannot do.
These narratives emphasize the community’s defects, needs and shortcomings. On the other
hand, excerpts were coded as “asset narrative”, when a community supporter offers positive
descriptions and explanations for behavior of community members; the supporter sees potential
of the community, speaks in an affirming way about the community members and/or sites
something s/he learned from the community members.

After all the notes, interviews, emails, media stories were uploaded and coded, I combed
through the data looking for what themes were emerging. All names used throughout this paper
are fictitious, created to protect the privacy of the people involved. The following section
outlines a background to some of the history, projects and key players studied in this research.

Study Background

This section will give an overview of the study that began as the Abantu Café Project.
Beginning with an overview of Burundian history and refugee resettlement, this section will also
cover US refugee resettlement policy and resources, Burundian refugee resettlement in Dayton, and an overview of three specific support programs in Dayton.

In 2006, the government of Tanzania began dismantling refugee camps in its territory that had been home to thousands of Burundians following the civil war in that country in 1972. As such, much of this population consists of second-generation refugees, born and raised within the borders of UN sanctioned camps and referred to by the then director of the UN High Commission of Refugees as “one of the most protracted refugee situations in the world”\(^3\). Following the gradual dissolution of the camps, many Burundians were repatriated to their native country, while some were resettled in new countries, including as many as 13,000 Burundians who entered the United States\(^4\). Between 2007-2010, 95 Burundians were resettled in Dayton, Ohio through Catholic Social Services (CSS). As with all refugees resettling into Montgomery County, the Burundians were assisted by a variety of services. These services vary in who is eligible and for how long (Ohio Department of Job and Family Services, 2009). All material needs are met for six months under the direct facilitation of a resettlement agency. In the case of the Burundian refugees arriving in Dayton, all services were coordinated by CSS and included the following directives from the state of Ohio (MacKim, 2010; OHDJFS, 2009):

- *Meet refugees at the airport.*
- *Provide housing, clothing, and household goods.*
- *Help them apply for a Social Security number and other forms related to working.*
- *Help them apply for cash, medical, and food assistance from the County Department of Job and Family Services.*
- *Arrange for their comprehensive health screening.*
- *Enroll them in classes to learn English, American culture, work skills, and eventually the skills and information needed to pass the citizenship test.*
- *Help them overcome problems and barriers to successful employment and integration into American life.*


In addition to these initial services, refugees are eligible for additional assistance for varying amounts of time. The following is a list of benefits available to the refugees (MacKim, 2010; OHDJFS, 2009):

<table>
<thead>
<tr>
<th>Benefit</th>
<th>Duration</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ohio Works First Refugee Cash Assistance Program (RCA)</td>
<td>5 Years (8 months without minor children)</td>
</tr>
<tr>
<td>Medicaid</td>
<td>7 years (or Refugee Medical Services for 8 months if refugee has no minor children)</td>
</tr>
<tr>
<td>Supplemental Security Income</td>
<td>7 years</td>
</tr>
<tr>
<td>Food Assistance</td>
<td>Unlimited</td>
</tr>
<tr>
<td>Refugee Social Services Program (employability, acculturation, citizenship, and naturalization services)</td>
<td>5 years</td>
</tr>
</tbody>
</table>

For the first six months after arrival, all refugees are guaranteed the benefits named above. After that time period, refugees must be working and attending English as Second Language classes in order to continue qualifying for the benefits. After the time limits named above have lapsed, refugees must become naturalized citizens, have a legitimized connection to the military or have 40 qualifying work quarters to remain eligible for benefits if the benefits are still deemed necessary. Burundian families in Dayton repeatedly lost eligibility for some benefits due to on site job problems and misunderstandings about requirements. Many Burundians received emergency extensions of services for three years, well past the guaranteed six months of benefits. Due to many challenges, including difficulties for many Burundians in retaining jobs, CSS requested and received emergency grants for a caseworker assigned exclusively to the Burundian population. For weeks, the caseworker worked with the Burundian families to meet their particular resettlement requirements and needs, helping with bills, paperwork and even driving them to work if necessary. The caseworker expressed discouragement when she would find the men playing cards and drinking beer when they were supposed to get to work. After three years, CSS “closed the cases” of the Burundian families, needing to focus limited funding
on other groups of refugees arriving to Dayton. Then director of CSS explained that the
Burundian families were “noncompliant” with what was required of them and therefore were no
longer eligible for CSS’s assistance. This study aims to deepen our understanding of the
circumstances in Dayton regarding the Burundians so as to improve future interventions and
open new pathways.

It is important to note here that these refugees arrived in Dayton precisely during one of
the steepest economic downturns in the city’s history. Population in Dayton has steadily declined
since the 1960s. Major corporations left the area just as the Burundians arrived, including the
closing of a General Motors Plant in October, 2008 and the transfer of the National Cash
reports that while unemployment has steadily dropped in Dayton in the last three years, now
hovering just under 10%, unemployment spiked just as the Burundians arrived in Dayton.
Unemployment was at 7% in October of 2007 and had jumped to an high of 14.2% in January of
2010. The economic climate is worth considering in light of the Burundian refugees struggle to
find and secure employment.

In response to the struggles faced among the Burundian refugee community, there
emerged many efforts involving community churches, organizations and concerned citizens who
volunteered to assist the Burundian community as needed. Many of the families have
reestablished their once revoked benefits and some are working toward sustainable solutions for
self-sufficiency. Several of the support efforts are included in this research as examples of social
support and will be discussed in this analysis. These efforts emphasized practical support, but
each had a dimension that included emotional support as well. A microenterprise was developed
by a community supporter (Georgia) to teach the Burundian women the skills of making and
selling crafts. An urban gardening initiative was created with the help of Sara Glass so that the people could do the work most suitable to their existing agricultural skills. And, finally, the support offered in sorting out the persistent housing issues faced in the community, included many efforts by one landlord, Mr. Vincent and one pastor, Pastor Gandy. The following explanations offer a brief background of these efforts and key players.

**The Microenterprise Project**

In the summer of 2010, some concerned community supporters approached a local artist (Georgia) requesting she teach the Burundian women some crafts that they could sell as a small business. The husband of the artist was already involved with the community members’ church and an art-related enterprise was deemed a natural fit to support the Burundian community. Meanwhile, the Burundian community was receptive and hopeful about the project. The mission of the project was to enhance the “quality of life and self esteem” of the women and their families and was meant to offer a combination of both practical and emotional support. In her own words, Georgia describes the project this way:

*We ... teach them to [make crafts], and then they sell it. The idea is to have a group where they can get together and feel safe, and have something to do. Most don’t have anything to do. They can bring their children, so that’s another thing. It helps them to get out of the house, with their kids. And help their marketing skills.* (Georgia, Interview, August 2011)

In the beginning, the women met every day and sold their wares on Saturdays at the farmers’ market as well as other local festivals. Over time, the work time was reduced to two days as the inventory was increasing faster than sales. Many volunteers helped with the project over time. In the end, interpersonal conflicts led to the end of the Burundian women’s participation in this project.

*Georgia:* A native of Mexico, Georgia is a mother of six children and well-regarded artist in Dayton. She is curator of her own art gallery, which features the works of artists around the
world working for peace and social justice issues. Much of the art in her gallery displays the gruesome impact that violence has on people, particularly women and children. With connections to artist communities, museums and academic programs throughout Dayton, Georgia is regularly invited to showcase her work for various events and programs. Since she is also a foreign-born American, she has a close understanding of migration and the struggles that integrating into a new country bring. While visiting her house, I was particularly struck by Georgia’s passion for exposing injustice and violence. One of her paintings hangs prominently in her entryway. It is a giant painting, at least five feet by four feet, of a woman’s brown eye. Through the eye’s reflection, the viewer sees what the woman is watching. In the painted eye is a seemingly endless line of refugees waiting, forlorn, on a dusty, forgotten road.

_Sandra:_ Originally from Rwanda, Sandra and family have been in the US for 10 years, and now have many family members here. Working full time and helping care for her growing number of grandchildren, Sandra is busy, but always committed to social assistance projects. She has always tried to reach out to the Burundian community in Dayton, as her native language (Kinyarwanda) is nearly identical to Kirundi. She too understands the difficulties of displacement and is passionate about helping people in such situations. She has started a small business to help orphans from her native country by buying crafts the children make and selling them in the US. She then returns the money to the orphanage to provide education scholarships for the children. She joined the microenterprise efforts with Georgia and the Burundian women in February of 2011.

_The Urban Gardens and Farming Project_

In the spring of 2008, local leaders introduced a soon-to-be community supporter, Sara Glass, to the Burundian community. Sara felt the situation these families faced was extremely
grim and yet also observed, in meeting the community, that they had the desire and skill to grow food. She began working with the community to develop a garden in the neighborhood. At the time, most of the families lived on one street. She partnered with the local Metroparks community gardens’ leaders to get materials and support, such as plowing, hot houses, rain barrels and tilling equipment. The gardens thrived at times and floundered at times over the course of 3 seasons. Sara fundraised for grants and devoted a good deal of her personal funds to the project. In 2011 and 2012, Sara also donated acreage on her own farm for use in expanding the growing potential.

*Sara Glass:* Living in a rural area outside of Dayton, Sara is very familiar with agriculture and livestock. A daughter of immigrants from France, Sara understands the adversity faced in migration to a new country, much as Georgia and Sandra do. She feels compelled to work with people arriving here from other countries and also spends a great deal of time supporting health projects in Central and East Africa. Sara was introduced to this particular region of the world through a neighbor from Rwanda who also introduced her to the local Burundian community.

*Housing Support*

As housing is one of the biggest expenses for any family, it became a stumbling block for the self-sufficiency of many Burundian families. Many large families in particular were unable to pay rent and utilities required for larger houses. Housing became an issue in which many community supporters tried to assist the Burundians. Some smaller families were moved into public housing, while one large family eventually received Red Cross housing and another is currently co-building a house with Habitat for Humanity.
Lee Vincent: Lee Vincent was the landlord for most of the Burundian families upon their initial arrival into the U.S. Originally a refugee from Vietnam, Lee is very empathetic to the situation faced by the Burundian families. He is clearly committed to assisting the families. He has informally employed many of the men to help clean up the neighborhood. Paying them each $7 per hour, he gathered a small group to clean up trash and do small projects for neighborhood improvement. After the Burundian families lost much of their direct housing assistance, they were unable to pay Lee for rent. A total of seven families were behind many thousands of dollars in rent. Lee did not want to evict them, but faced a very difficult financial situation. Lee is also very proud of his neighborhood that he has helped clean up. He wanted to do what he can for the families, yet is also concerned about all the lost revenue.

Pastor Joe Gandy: Due to the housing problems, a local pastor, Pastor Joe Gandy, had moved many of the families to a nearby town, Huber Heights, to live in public housing. This effort allowed families with fewer children (less than 6) to live in housing with very low rent required. Many of the families moved to the same complex so were able to maintain some community feeling. Families with more than six children could not yet move, as the public housing available was not large enough. Much like all the key characters described thus far, Joe Gandy was also an immigrant, coming to the US from Rwanda. He was hand selected by the church to reach out to the Burundian families and over time has done all he can to support them.

There were many other churches, individuals and organization who have assisted and interacted with the Burundian community in some way. The ethnographic data in this study is primarily focused on the people and efforts shared above.
Barriers and Opportunities for Building Social Support

This study offers insights into how some events caused turmoil in the community and how other events became points of opening for relationship development, offering glimpses into how a robust social support network may emerge in the future. The following section begins by exploring the barriers to building supportive relationships. Distrust and fear, limited perspectives and understanding of the other and the unsustainable nature of unidirectional aid all surfaced as key barriers to building social support. This paper will then explore what has worked for building relationships, both in Dayton and other models in the United States. These examples illustrate opportunities for supportive relationships through mutual learning as part of the resettlement effort. Most notably, for Americans to learn from Burundians, this may require moving into the places and temporality most familiar to Burundians, as these are the spaces and times where the people are most comfortable. However, findings are still emerging about the quality and nature of learning that emerges in such instances and these will be key questions for future research.

**Barriers to Building Supportive Relationships: Distrust and Fear**

Social support is about relationships. Trust must preexist in order to give and receive support (Finfgeld-Connett, 2005). In the case of relationships between Dayton-based Burundians and local community supporters, one of the primary concerns voiced was the perceived lack of trust. In the following examples, there are several angles explored as to why distrust and fear may have been prevalent and often destructive to relationships between the Burundian community and local supporters. The Burundians experience of trauma from the past and present, extreme economic stress, and learned suspicion of outsiders are all factors that appear to inhibit the growth of trusting relationships between the Burundians and some local community
supporters. In the next section, the community supporter’s lack of understanding the Burundians is also shown to create barriers to trust and relationships.

Escalating trust issues became a divisive problem in many support efforts, particularly the microenterprise project. Some supporters suggested causes for the lack of trust, such as wars and corruption experienced in the people’s past. A commonly voiced explanation and vexation with the lack of trust on the part of Burundians is expressed by one community supporter as:

*People who have been on the run [like the Burundians] do not trust anyone ... they need to learn to trust- we are all trying to help- but they just don’t see that*  
*(Georgia personal communication, Microenterprise Project, August, 2010)*

Distrust ultimately ran so deep in this project that there were serious accusations made about the community supporters by the Burundian women. The women believed project leaders, Georgia and Sandra, were stealing their money, an accusation that was extremely hurtful to the supporters. The reality was that Georgia had spent thousands of her own dollars to fund and sustain the project. After one year of operation Georgia had decided to factor in actual costs of the project rather than shoulder this cost personally. Whereas the women originally pocketed every cent they received for a craft while Georgia paid for materials and space rental, Georgia now factored these costs into the enterprise, giving the women the gross earnings from sales. Georgia tried to explain this to the women, holding up receipts many times for payments made, but the women never seemed to accept this explanation. It remains unclear whether the Burundian women could not comprehend the costs of running a business or whether they were simply upset about the reduction in pay. Either way, the Burundian women were suspicious of the changes and consequently distanced themselves from Georgia and Sandra. Over time, the Burundian women stopped speaking to Sandra, even when she directly asked a question to them in Kirundi. For example, on site in August 2011 I asked Sandra to help translate for me and she
said she could not, since the women would not speak to her and would ignore her if she spoke. She advised me to speak slowly in English, as this would be more effective than involving her.

Supporters were hurt by accusations and saddened, even angered, by the growing mistrust, which they often chalked up to past violence or personality defects. Yet, in fact, one volunteer had unjustly taken from the project in June of 2011, which may have increased suspicions among the Burundians that others would do the same. After all, the Burundian women were long time refugees in perpetually vulnerable positions where suspicion of outsiders may have been honed as a survival skill (Malkki, 1995). According to Georgia, a local artist had met the Burundian women at a street fair and subsequently offered her services to the project. This volunteer had many ideas to improve the project and was angered when Georgia preferred a different business model. The volunteer had made hundreds of crafts side-by-side with the Burundian women and said she would take these crafts and sell them for the women. After weeks of tension, the volunteer and Georgia had a heated disagreement about running the enterprise, and the police were called in to escort the volunteer off the premises. Despite many efforts to recoup the inventory of crafts still held by the volunteer, the woman refused to give it back, claiming she had made the crafts and was entitled to keep them. Many hours of work and funds for materials were lost, which was both economically and emotionally devastating to the enterprise. It was immediately after this incident that the Burundian women began overtly suspecting Georgia and Sandra of withholding their earnings. Georgia’s choice to give the women only gross earnings also occurred at this time. It appears that the poor actions of the volunteer were partly the cause, unfairly or not, of the deterioration of trust between community supporters and Burundians in the microenterprise project.
Such incidents as the stealing of the craft inventory deeply impact already fragile bonds of trust. Indeed, this was not the only incident where police were called to intervene in a tense situation involving the Burundian community. Another particularly violent episode of a dog attacking a Burundian man led to the following assessment from a Burundian community supporter and leader:

When the most Burundian arrived in Dayton, most of them were placed at the Neal Avenue, but the residents they met there have never been happy to see them there as neighbors. That's why they tried to expel them from that neighborhood by bring their dogs to chase and bite any Burundian they could catch. That bad action had been stopped by the police, but nobody had been sued neither any correction nor reaction had never been taken against those aggressors. For them it was a game that's why few days ago others aggressive people bit Mr. Mac half to kill him. He has been found after 3 hours where they left him thinking he was dead. Now he is at the hospital and is in bad conditions right now. He might have a serious injury on his gallbladder. Now the question is why that abuse towards Burundian community in Dayton. Whoever can help please try to help these people, they need protection, dignity and safety. (Donald, email correspondence, leader in the Burundian Cultural and Education Association, March, 2011)

Whether or not all the neighbors disliked the Burundians remains unclear. Yet this statement expresses the perception among Burundians that they are being intentionally attacked, exemplified in traumatic episodes like Mr. Mac’s life threatening injury. Police had to be called on several occasions to protect the Burundian people from violent incidents. For example, in the second year of growing vegetables in the Burundian community garden, some neighborhood youth vandalized and destroyed the crops, an incident cited often by the community as extremely upsetting. In addition, several children complained of being teased and bullied at school by American children for their “strange” clothes and accents. A staff member at Catholic Social Services mentioned additional involvement of authorities, this time to address behaviors of the Burundian parents. After several occasions of seeing Burundian children running free in the streets and explaining US safety norms with the parents, the CSS staff member called Child Protective Services to intervene. Through all these incidents, there is a steady pattern of
intervention by authorities to protect, or give warning to, the Burundian community. At these junctures, tension and conflict rose to such a degree that external authorities were deemed necessary for resolution.

Such incidents contributed to the fears within the community, and subsequently increased suspicions of outsiders. As one Burundian community leader said with remorse:

*Oh the people are so excited when they first come here. But so quickly they feel so scared. They do not know what is happening. And every day, they are scared* (Ivory, Burundian community leader, personal communication April, 2011).

Another community supporter explained,

*They [Burundians] feel lost. They don’t know where they are... They used to walk everywhere (in the camps) and know everybody. And now they are just lost* (Bambi, local church volunteer, personal communication August 2009)

I recall visiting one family regularly. Every time I knocked on the door, though they were usually expecting me, the door was opened only the slightest crack, one eye showing through a sliver. When they saw it was I, the door was opened wide with a friendly greeting. I always wondered what they were afraid of, and I never learned specifically. One day, upon discovering I lived in the neighborhood of Oakwood, a high-income neighborhood in Dayton, the mother of this house (Emily) said,

*“It is secure there where you live? Where we live (Neal Avenue) is not ‘secure’”. I ask what she means. She does not explain more, just says she wants to live in a secure place...Her head tilted back and her eyes on the roof of the car, staring off into space, looking not sad so much as defeated.* (Emily, community member, personal communication April 2011)

Emily often suffered from migraines and other stress-related ailments. She felt overwhelmed by the relentless bills her family faced from rent and utilities to cell phones. In her own words, Emily expresses the juxtaposition of stressors from the past and in resettlement that extend beyond the fear of violence into the fear of economic survival:
Fear is a prominent emotion many Burundians express about their future in Dayton. And fear prevents the trust necessary to form new social support relationships. In speaking about Dayton, several Burundians remember their excitement prior to arriving to the US and have felt their hopes quickly dashed by fears. Meanwhile, many community supporters felt frustrated when their good intentions and donations of time and resources were viewed with suspicion. For example, on several occasions, the Burundians refused help that was offered because they felt wary of the giver’s intention. One community supporter from Rwanda (Sandra) tried to write a grant to support the people but the people refused to participate. Sandra was writing a grant for a position within Catholic Social Services for a liaison to the most vulnerable refugee communities, including the Burundians. She hoped that in this way she could devote all of her time to the community, feeling that she was uniquely qualified to offer the necessary bridges in language and culture to help the people. Yet, several of the Burundians were suspicious about Sandra creating a job for herself in the process and they said they would not work with her if she got the money. Her frustration is evident in her statement:

You know I tried to get some money for the projects. I wanted to help the [Burundian] people with English and hygiene and all the things they need. I work on this grant and I try to get the funds. But they say “NO!”... and now they are crying because they have nothing. (Sandra, Microenterprise Project, personal communication July, 2011).

Over the course of this research, there were several similar incidences related to grants, funding and research that further contributed to the suspicions of the people. There were many
disappointing offers for support that the community felt never manifested. Several leaders, Rwandans and Americans alike, asked for the Burundian community’s support in writing grants for funds or conducting research projects. When the grant was awarded or the research complete, the community complained indignantly that they never see where the money is spent or how the grievances they expressed in focus groups and interviews resulted in changes. For example, one Congolese man, Munster, led an afterschool tutoring program with the mission to “provide a non-denominational, faith based organization that promotes Christian principles, life skills and understanding of African cultures and values [through provision of] social, economic, education and recreation services to the people of all ages”. After visiting the houses of many Burundians to share the program goals and mission, Munster requested their input and asked for their support in developing the project. When he was awarded a substantial grant, the Burundian community voiced suspicion of his intention. Some believed that once he got the money, he stopped contacting the Burundian families and they were unclear where the money went. While his tutoring program continues operating at a local church, many in the Burundian community have not participated as they feel the money he received is not supporting their families in the way Munster had promised it would. These experiences have eroded some trust, increased some fears and left the community suspicious of many outsiders, even when the intentions of supporters are pure. Whether or not Munster properly explained the mission and offerings that would be offered through the grant, the outcome again was serious suspicion by the community and withdrawal of participation in the support project.

The community supporters’ common belief that these Burundian fears and lack of trust are born of past experiences is likely part of the story. It is also helpful to consider what other factors are contributing, including the economic stress and violent episodes experienced in
BARRIERS AND OPPORTUNITIES FOR BUILDING SOCIAL SUPPORT

resettlement. As seen in the examples above, the people faced some serious, and unexpected, rejection, pressures and violence in the US. Fragility of trust and prevalence of fear have proven to be mighty barriers to forging supportive relationships between the Burundians and local people. Fears of past, present and future appear to impede the community’s ability to trust outsiders. In some cases, this fear has also led to rejections of local Burundians as well. Suspicion of outsiders may be a well-honed survival skill for many Burundians. Prior to arriving in the US, the Burundians were war survivors. Refugee camps had many reports of violence, though few talk openly about these incidences (Human Rights Watch, 2000; Malkki, 1995; Cultural Orientation Research Center, 2007). By any characterization, the community has suffered great trauma. In addition, the people faced violent opposition from some individuals upon arriving in Dayton. While these incidences were the exception, rather than the norm, they were referred to often among supporters and Burundians as traumatic and outstanding experiences that darkly colored Burundian perceptions about their new home country.

As research has shown, one of the largest challenges to refugees is reforming a shattered social support network (Miller & Rasco, 2004). Meanwhile, social support is one of the most critical components of a healthy future, especially for refugees (Stansfield, 2006; Kirmayer et al., 2010). Add to this, layers of stress and violence on top of a traumatic past, and the odds against developing trusting social support relationships soar. Some research has developed practices that help community supporters and refugees develop trust and resilience as a core foundation for building sustainable social support (Goodkind & Deacon, 2004; Stepakoff et al., 2006; Doron, 2005; Miller & Rasco, 2004; Mollica, 2006). Dr. Richard Mollica of the Harvard Program in Refugee Trauma, for example, demonstrates that healing from trauma requires devoted practices of listening and caring from both health care professionals as well as the society surrounding a
victim. Since trauma is often buried or “invisible”, victims may suffer silently and the chance of reforming trusting relationships is impossible. Yet a practice of openness and conversation about the past and willingness to learn from the refugees, according to Mollica’s (2006) research, has consistently shown to rebuild trust and reduce fears. These practices emphasize the need for dialogue and mutual learning so that trust emerges where suspicions and limiting beliefs about the other once stood. Likewise, Dr. Jessica Goodkind principal investigator of the Refugee Well-Being Project at the University of New Mexico, has developed a program of mutual learning and advocacy which links university students and refugees through “Learning Circles”, giving each the time and space to learn about each other’s hopes, struggles and experiences. Her research has found that through Learning Circles trusting and supportive relationships build among the students and the refugee communities in a relatively short amount of time (Goodkind, 2005, 2006). These examples not only build trust, but also understanding, another necessary component for social support relationships.

**Barriers to social support relationships: Myopia of perspective**

The issues of distrust and fear discussed thus far demonstrate some of the most salient barriers to the development of support relationships. Such mistrust and fear also appears to have distorted the perceptions that the Burundian community and community supporters had about each other. Beliefs about each other became myopic in nature, limited to a narrow and incomplete perspective. Practices of mutual learning as seen in the Refugee Well-Being Project and the Harvard Program in Refugee Trauma, among others models, may help develop practices of listening and learning in Dayton that correct blurred and ultimately divisive perspectives of

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5 I borrowed the concept of “myopia in learning” from some of the ideas found in the following paper. The meaning of myopia I use in this document is in part rooted in: Levinthal, D. & March, J. (1993). The Myopia of Learning. Strategic Management Journal, 14, 95-112.
each other. In this section, Burundians’ voiced perceptions of community supporters as well as community supporters’ voiced perceptions of Burundians will be explored. These perceptions directly impact not only the grounds for trust in relationships but also the methods of working together and possibilities for solutions.

Literature on social support consistently shows how critical the perception of support is to the efficacy of the support (Stansfield, 2006). No matter how abundant and unconditional the support may be, a person must actually perceive and desire the offered support in order to receive the benefits of the support. With some of the trust and fear issues outlined above, it is already apparent that the perceptions among Burundian community members was that some social support offered was actually a guise to exploit the community. There emerged several examples in this research where a community supporter and a community member described the same object or event quite differently. Sometimes one perception would even be precisely polar to the other.

Burundian perceptions of support

The following section will explore two incidences where the Burundian people resolutely rejected an object of support. In both cases the support was felt to be manipulative and condescending. Also, both cases exemplify the dichotomous split between the perceptions of Burundians and community supporters when describing an identical object.

For one, brochures were produced for the microenterprise project in full color and attractively designed, intended to share with a customer exactly what they were buying. The mission of the project was a statement of unconditional social support: to help provide emotional and economic well-being for refugees in Dayton.

Vision: to create crafts to earn a fair wage that will allow them [refugees] to improve their quality of life and self-esteem. Eighty percent of the proceeds go
directly to the hands that created the crafts while twenty percent is dedicated to replenish materials needed for the continuation of this project.

**Mission:** We believe that every human being should be treated with respect and understanding. Many of the artisans are in the process of learning English. The majority of the jobs available to them are low-skill low-paying jobs that keep families away from each other. We pledge to:
- Provide materials and a friendly environment for women to develop new skills as Artisans.
- Emphasize respect for diversity and foster a multi-cultural group where all can learn from each other.
- Allow women to earn a living while staying with their young children.
- Improve refugee’s self-esteem and cultivate a desire for peace and stability in their lives.
- Maintain a forum where families can work together to foster mutual respect.
- Provide a bridge for open communication with those from other cultures.

While these words are full of respect and care for the Burundian women and other refugees, it was the photos on the brochure that angered Betty, one of the Burundian women to the point where she threw the brochure on the ground when hotly explaining her problem with the content.

Ivory, a Burundian leader, is translating this incident below with Betty:

> Betty then goes to a bucket in the room and picks out a brochure for [the microenterprise project]. There is a photo of Georgia’s husband holding Betty’s baby. It was taken one year ago. Almost all of Betty and Heidi’s children are in the photo and no Burundian adults are present. Only the backs of [the children’s] heads are showing, but Betty knows them all being their mom. She points to each, “see, there is Nichole, there is so-and so” and points to each child, naming them with outrage each time. Ivory (translator) explains that Betty feels it makes her kids look like orphans- even though they are not. This is her evidence of that in fact, Georgia is using her and her kids to make money and she is furious that she was never asked to have her kids picture taken... Ivory says Georgia and Sandra always say that they have no education and can’t read; that they control the money at the market and talk to the customers in a way that edges the (Burundian) ladies out. (Personal Field notes, microenterprise project, October, 2011).

This incident reveals an enormous contrast between the written mission and vision of the project and how the community members understand it. The perception in the community is that the community supporters are using the community members’ vulnerability for financial gain.
The constant use of the word “refugee” for example was quite upsetting to the women who felt it made them appear forever helpless. In making the women appear helpless through the use of the word “refugee” and in making their children look like orphans, the Burundian women believed there was a premeditated effort to profit from the community’s poverty. Here, the purity of intention in offering economic opportunities to the women in a trusted and safe space was ultimately not perceived as devoted social support, but rather as manipulation. Eventually, these perceptions contributed to the break down of the microenterprise project and left behind a great deal of tension and sadness.

Another example of a support gesture perceived as manipulation was when a Rwandan pastor tried to fundraise on behalf of the Burundian community. Pastor Gandy was trying to collect resources to help the community. He is a devoted pastor and was assigned by the church hierarchy to aid the community. From the perspective of all community supporters, Gandy was a perfect fit. Church is exceedingly important to most Burundians. Certainly a place of worship this community could call their own would be a huge boon to the support system the community would need. Since Rwandese share nearly the same language as the Burundians and since Gandy has lived in the US for some time, he could readily connect to the people and help them with their spiritual and practical needs. Pastor Gandy took this calling very seriously. Devoting endless hours to visiting anyone with questions, translating with social service agencies, building a choir for youth, explaining customs and requirements in the United States, and generally handling any question or crisis that arose. He seemed to be “on call” 24 hours a day, working tirelessly to connect the people to volunteers and services that could help with whatever they need. And yet, the community perception was that he did not respect them. While he was trying to generate support for the community by posting an appeal on YouTube, he used the words
refugee, poor and orphan. The people do not identify with these words. Indeed, use of the word “orphan” in English is a false characterization as all the Burundian children in Dayton have living parents. While Pastor Gandy was most likely genuinely trying to get resources for the people, the perception in the community was that he wanted to expose and exaggerate the poverty of the people for his own gain. This church once was filled with Burundians and Rwandese and now very few in the Burundian community still attend there.

Betty’s retelling of the YouTube incident shows her aggravation about her perceptions of Pastor Gandy’s “support”. In this excerpt Betty, Ivory and Heidi are all Burundian women hotly discussing the video:

Betty eventually asks Ivory to look up something on You Tube... She asks Ivory to search “Joe Gandy”... The video was never found, though there was about a 20-minute effort, including phone calls to other people, to find it. Apparently Pastor Gandy gave a sermon in which he appealed for help for Betty’s family and referred to her 8 kids as orphans. She was furious about this- she spoke so rapidly and her face was fiery- her eyes were so intense and her body language too. She was pounding her fist down and then would occasionally say something that made Heidi laugh- it appeared to be making fun of Gandy. She says “I do have a husband” emphatically- eesh! (Personal Field Notes, October, 2011).

A community supporter, one of the Burundian leaders, also explains this incident, echoing in a more detached way, the frustrations the community feels about how they are represented by some supporters:

“You see”, he says, “the Burundian people here- they are not educated like the Rwandese. You know most Rwandese, they love school so much” – he laughs, speaking jokingly, truthfully too. “They have been here, they have good jobs. The Burundians are tired of them saying ‘you are illiterate, you do not know anything’. They don’t want this. You know Pastor Gandy (Rwandan) he is trying to get everyone to his church. He is saying, ‘come back. I love you, we love you’. Some few girls, they still go there....But then he makes a video of the girls singing and puts it on YouTube. He says, look at these poor refugee girls, they are “orphans”. Won’t you please give us money to help these poor orphans? But why?” Donald is looking at me with mild incredulity. Why would Gandy say this? Those girls all have parents. They live here in Dayton. Gandy takes the video off YouTube and he is saying he is so sorry for that. But the people do not trust it.”
Here again, while Pastor Gandy misrepresented the community, his intention was to generate donations to help the people. The word “orphan” has different meanings in different languages. One Burundian leader explained to me that “orphan” in Kirundi can signify a child whose parents are living but unable to care for the children, whereas in English orphan usually is reserved only in describing a child whose parents are both deceased. Therefore, it is not clear that Pastor Gandy was intentionally lying about the girls who do in fact have parents. Yet, perhaps he did not feel the parents had the resources and skills to care for the kids. The Burundians were furious at the representation of their children as orphans and perceived this attempt at “support” not just with suspicion but a great insult.

Community supporters’ perceptions of Burundians

The divergent perceptions shown in these examples exemplify the suspicion and tension surrounding some attempts at social support. Again, the community supporters and community members perceived the same incident quite differently. The support was rejected and relationships damaged due in part to the perceptions held in the Burundian community. And underlying the heightened emotion was the need on the part of the community to be respected and validated as capable adults. The community members were very aware of how they were being perceived in the US. It does not seem likely that community supporters were intentionally manipulating the poverty of the Burundians for personal gain. Yet the perceptions of community supporters that the Burundians were entitled, uneducated, and endlessly needy deeply undermined the relationships between the Burundians and supporters. Indeed, how people perceive each other impacts the relationship. For social support to develop in a healthful way, mutuality and respect is essential (Stansfield, 2006; Finfgeld-Connett, 2005; Goodkind, 2006;
Goodkind et al., 2011). And yet, the perceptions on the side of community supporters about community members largely emphasize the needs and deficits in the community, with little attention to assets or capacities. These perceptions from community supporters contribute to the barriers for meaningful social support, just as the trust and fear, and resulting deductions about people in the US, within the Burundian community impeded relationships. In the following excerpts, supporters share their beliefs about why the community is struggling in the US. This table breaks down statements according to common themes about the Burundians heard from dozens of supporters. These quotes are found in either data collected from the *Ethnic and Cultural Diversity Caucus* or from qualitative interviews I conducted in the field.

<table>
<thead>
<tr>
<th>Burundians are entitled and habitually dependent</th>
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<tr>
<td>The Burundians... are long-term residents of refugee camps (some for as long as 38 years). They have been uneducated and entirely dependent for several generations. The dependency created by extended periods of camp life is a problem that is prevalent in any area where refugee camps have become long term (Congo, Pakistan, Tanzania...) People do not work and they are fed. They have no responsibilities and limited educational opportunities. This is the background of the Burundians. They need to begin to act and think for themselves and weaned from their dependency. (Volunteer, Gardening Project, December, 2010).</td>
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<td>The Burundians spent 33 years in refugee camps without even having running water, and they were 100% dependent on aid. It is difficult for them to understand a job as the key to independence when they have always relied on aid (Staff from Catholic Social Services, Interview with Ethnic and Cultural Diversity Caucus, October 2010).</td>
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<tr>
<td>I feel the [Burundian] women are really missing out and that they need to “do their part” if they want to make it in the US (Staff Catholic Social Services, Interview, November 2010).</td>
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<tr>
<td>They need to be pushed to learn more English. They have translators for the doctor, and they don’t work, so they haven’t been forced to learn it. (Volunteer, Microenterprise Project, March 2011)</td>
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<tr>
<td>There came a time when CSS could not provide for the needs of the Burundian refugees’ needs for example. There sometimes comes a time when the program has to draw a line because some refugees do not want to work or take the jobs they find for them for example. They are not there to be the permanent support of the refugees. There comes a time when the refugees must step in and take over. (Staff from Catholic Social Services, Interview with Ethnic and Cultural Diversity Caucus, October 2010).</td>
</tr>
<tr>
<td>Burundians have no skills or education, the needs are extraordinary</td>
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<tr>
<td>Burundians have so much to overcome. While all refugees have an issue with language, the Burundians have it to a much greater extent than most. They are largely peasant farmers from a completely rural area and have problems adjusting to an urban setting. Because of this</td>
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They are also the hardest population to get a job for since they have such limited skill sets... (Staff at CSS, Interview Ethnic and Cultural Diversity Caucus, October 2010)

We came up with the idea largely in light of the Burundian refugees because they’ve arrived with no jobs skills that can be adopted in the US. The Burundians are long-term residents of refugee camps in Africa. The ones that are here have thus missed out of any exposure to education & independence. They have very poor life skills. [They have a] complete unfamiliarity with American climate & technology & lifestyle... They are all second-generation refugees who have never lived in their own house or run their own life... Tasks such as just managing money, buying own groceries, paying bills, using and paying for electricity are foreign to them.... Overall, there has been so much trouble with Burundians because they’re so out of their league... It’s the very basic things for the Burundians [that they are difficulties with]. (Volunteer, Gardening Program, Interview, March 2011)

Well, for example, we wanted to teach them how to do [this craft]. I had to go back to the drawing board and teach some of them how to use scissors. There’s a lot of skills that are not there. Not only just making crafts, but with English, hygiene skills, just... regular skills. Like how to use a microwave, what not to do like put spoons in your cup of coffee in the microwave. These things, they are very scary. But they actually have to learn these things the hard way, if we’re not there with them. We ask questions, sometimes ask them what they’re having problems with, help them to communicate with their landlords or agencies, whatever they need. It depends on the person, and their particular needs. - (Volunteer, Microenterprise Project, March 2011)

**Burundians have cultural and intellectual deficits**

They have trouble understanding how to clean their house, as well as understanding the concept of what “clean” is. They have problems understanding situations with health care. They struggle with budgeting; it is impossible for them. (Staff at CSS, Interview with Ethnic and Cultural Diversity Caucus, October 2010)

I feel so frustrated with people [like the Burundians] who have really been oppressed and then they turn around and treat others so horribly. (Volunteer, Microenterprise Project, July 2011)

Burundi is a very closed community and they have not had to interact much with people from different cultures prior to coming to the United States. They have difficulty with the concept of time and keeping appointments. They often do not understand that Social Security cards and other important documents must be kept in a safe place. It is a challenge for Burundians to trust people in an organization or an official setting because the government in Burundi is so corrupt. (Staff at CSS, Interview Ethnic and Cultural Diversity Caucus, October 2010)

While these are some selected examples, the interviews conducted through the Ethnic and Cultural Diversity Caucus, interviews conducted for this project and accompanying field notes, actually feature fifteen community supporters from eight different organizations, many echoing the above perceptions about the Burundians again and again in many different contexts. These sentiments are shared over a two-year time span and are spoken as the whole truth about who the Burundians are. The narratives appear to travel among community supporters, becoming
a habit for how to understand the Burundians. This habit of thought limits the perceptions about who the Burundians actually are and contributes to the barriers of forming social support relationships founded on trust and understanding. When the perspectives shared above are reinvestigated and community supporters experience and observe the unfolding and ever evolving truth of who the Burundians are, the possibility for relationships emerge. The same is such for the Burundian perceptions on the community supporters.

*Perceptions and Policy: Narratives Shared by State and National Organizations*

While it may be impossible to identify the origins of the narratives about the Burundians above, investigation of materials from the state and national levels, which were distributed to resettlement organizations like Catholic Social Services contain traces of the same perceptions, albeit more subdued. For example, the Cultural Orientation Resource Center (COR) published a “Backgrounder on the 1972 Burundians”, meant to provide resettlement agencies and community supporters with some understanding of the history and culture of the Burundian refugees so as to better “assist” the group. Advice such as the following was included in the document:

*Resettlement services will need to take into account this group’s [the Burundian refugees] low level of formal education, rural background, long residence in refugee camps, and past trauma* (Cultural Orientation Resource Center, 2007, Backgrounder on the 1972 Burundians).

This advice concludes a document which outlines the trauma, needs and cultural issues the Burundians will likely present in the US as well as suggestions for what the Burundians will need to learn upon arrival. The outline lists the challenges the Burundian community is likely to face during resettlement, including lack of formal health care experience, literacy, applicable job skills, and exposure to modern amenities. While this document addresses some of the cultural particulars of the Burundians, it is meant to improve the resettlement agencies understanding of how to best *help* the Burundians without mention of how to connect with, validate or learn from
the Burundian community, all necessary components for viable social support relationships and healthy integration. In other words, cultural examination of the Burundians serves to improve resettlement aid, not to build a foundation for mutual learning and social support relationships. Indeed, understanding the background is critical for those trying to assist the Burundians in resettlement. And yet, this perspective ultimately becomes limiting.

Collaboration, mutual learning and the creation of social support networks is not actually a goal of refugee resettlement in the US summarized in the Refugee Handbook from the Ohio Refugee Services Program, all of the support offered by resettlement agencies is practical and material in nature:

Ongoing benefits for the newly arrived refugees include transitional cash assistance, health benefits, and a wide variety of social services, provided through ORR grants. The primary focus is employment services such as skills training, job development, English language training, orientation to the workplace and job counseling. It is crucial that employment be found early after arrival, as it leads not only to early economic self-sufficiency for the family, but adds greatly to the integrity of families who seek to establish themselves in a new country and provide for their own needs. Often this requires more than one member of the family becoming employed, and special attention is paid to ensure that women have equal access to training and services leading to job placement. To further assist in family adjustment to the U.S., additional services are offered such as family strengthening, youth and elderly services, adjustment counseling and mental health services (Ohio Department of Job and Family Services, Ohio Refugee Services Program, Refugee Handbook, 2009).

Herein, self-sufficiency is considered the primary goal of resettlement. As stated in the Ohio Refugee Handbook, “The goal of the U.S. refugee resettlement program is to provide for the effective resettlement of refugees and to assist them to achieve economic self-sufficiency as quickly as possible” (OHDJFS, 2009). In this paradigm, time and resources to build mutual learning and relationships is not yet included, so the emphasis from the federal to state to local levels is on practical and material issues. Amidst strict budget constraints and great existential needs, all emphasis is on obtaining jobs and learning English quickly (OHDJFS, 2009). And yet,
research shows that the emotional and social well-being of the people is critical to the long term sustainability of the refugees. It is not just a superfluous, altruistic or interesting sidebar to engage in listening and mutual learning. Research is showing that this may be an integral component in meeting the goals of self-sufficiency and successful integration (Miller & Rasco, 2004; Goodkind et al., 2011; Kirmayer et al., 2010; Mollica, 2006). Yet every state and federal publication on refugee resettlement continues to emphasize the training and services that must be provided for the refugees, with scarce mention of learning from or validating the refugees’ experiences, ideas, concerns or knowledge.

Indeed, the US Committee for Refugees and Immigrants (USCRI) published a three volume series to aid agencies working for the resettlement of Burundians (2007-2010). This series called, Living in the United States: Life Skills for Burundian Refugees, consists of 25 modules, written in both Kirundi and English, discussing a range of various “life skills” the Burundians will need to learn in the US. Accompanied by facilitator guides and videos, the stated goal of the program is “Supporting the successful integration of Burundian refugees”. Through funding from the Office of Refugee Resettlement and the US Department of Health and Human Services, USCRI “provides support and resources to Burundian refugees and resettlement communities to assist in overcoming barriers to integration and obtaining self-sufficiency.” Each of the 25 modules is a detailed explanation of one facet of US life from banking to health care to education to laws and rights. The modules also move beyond the practical areas to educate Burundians on emotional and interpersonal issues as well, such as proper communication and parenting skills:

*Excerpts from the Communication Module: Resettling to the United States can be stressful, but communicating well, spending time with your family, and giving each other respect and support will help strengthen your family. Make time to talk, express yourself clearly, and show understanding to others. Set goals as*
individuals and as a family, spend time together doing fun things, and keep your traditions and culture alive in your new home (USCRI, 2007, Volume 2, Topic 6).

When others speak, do not interrupt. Show with your face and body that you want to hear what they have to say. Listen carefully, and think about how you would feel in their place, experiencing what they describe to you. Communicate back to them what you understood from what they said. Give them a chance to correct any misunderstandings (USCRI, 2007, Volume 2, Topic 6).

Excerpt from the Parenting Module: Parents have many responsibilities to their children, including nurturing and loving them, supporting their physical and emotional development, and making sure they are safe. Children feel and do better when they have a strong relationship with their parents, so it is important to develop this bond by reading together, playing games, or talking about school. Encourage your children to feel good and confident (USCRI, 2007, Volume 2, Topic 5).

In looking back at the perceptions stated by the Dayton resettlement agents and volunteers, there appears to be a similar slant in USCRI literature. All of these training modules are written as commandments, as if the US perspective on parenting or communication is the correct one that the Burundians need to learn. The modules on parenting delve into such American customs as offering choices to children (do you want milk or water? when the child asks for juice) and “timeouts”, a disciplinary option for misbehaving children. Yet we know that parenting and communication are often governed by norms and customs, and there has never been a scientifically valid “correct” way. Yet, even in these highly personal and subjective areas, the USCRI material is claiming authority and a need to educate the Burundians on better ways to conduct their affairs. Indeed, throughout the USCRI training there appears to be scarce recognition that the Burundians arrive in the US with any skills at all. Hereto, the statements from local Daytonians echo this sentiment time and again that the Burundians have “no life skills”. Again, the limited perspective impacts how Americans interact with the Burundians and ultimately has proven to be a hurtful barrier to building trust and meaningful social support.
In the goal to help integrate the Burundians successfully, USCRI calls on the participation of all levels of society and suggests goals for each participant, including the USCRI, the local Resettlement Agency, and the local American community. None of these roles or objectives mentions any need to validate or learn from the Burundian perspective. While there is an appeal to American communities to “increase understanding of Burundian refugees”, the orientation remains firmly within the boundaries of a goal to help. In other words, improved understanding of the Burundians is for the sole purpose of being a better aid to the refugees’ integration and not to consider how the Burundians ideas, knowledge, experience, perspective, or skills may contribute to solutions or improvements in their new homeland. By definition, mutual learning cannot be about a unidirectional flow of help from one to another, but rather a mutual transformation and reciprocity that creates an improved shared future.

Upon initial investigation of the Burundian community in Dayton, I spoke with many community supporters and heard the same narratives many times. These narratives were stated as facts, warnings and lessons learned about the community. The narratives and beliefs appear to travel locally and are repeated by many people who have worked with the community. Some traces of the narrative can be seen in state and national literature, which in some ways “speaks for” the Burundians before they themselves are able to share their stories. In the end, these perceptions impact the interactions in relationships and also the solutions that emerge to the problems faced in support projects.

The following incident with Dotty, a volunteer with the microenterprise project, shows how perceptions about the people as lacking and in need of training impact the interaction with the people and limit the solution to problems. Dotty was concerned about how much more the
Burundian women could sell if they would interact more boldly with the customers. In this excerpt, Dotty is trying to instruct Heidi in ways to improve sales at community fairs:

“*You see, Heidi, that when Betty is there, you both do not talk to people (customers). You sit there and so people do not buy anything. You have to talk to them.*” Heidi laughs a little, nervously... Dotty asks Heidi, “*After Betty left, you were talking to the people more. Why did you do that?*” Heidi shrugs and says “*ah, done know*” quietly, eyes on the floor...Dotty says, “*ok- let us practice. I am a customer, and I say hello to you. What do you say to me?*” Heidi laughs again and clearly feels uncomfortable. She never looks up, just staring at the floor, and busying her hands with the crafts...Dotty insists. “*Come on, Heidi*” she says, “*how can we do this? If you want to sell crafts, you have to learn English better and learn to talk to the customers*”.

Here is an example where Dotty as a community supporter is clearly committed to helping Heidi, a community member. A volunteer spending her Saturday at an art fair with the Burundian women, Dotty is trying mightily to improve the sales skills of the women. She has a clear idea of how this should be done and is instructing Heidi exclusively from that perspective. As Dotty speaks, Heidi is only barely responding, and also actively moving away from Dotty. Here, Dotty has jumped from her idea of the problem (the sales are not good) to her solution (talk to the customers in English) to her idea of intervention and training (asking Heidi to role play interactions with customers). Out of Dotty’s urgency to “help” Heidi and Betty and fix the problem, she has directed her support at the women purely out of her own ideas, not consulting Heidi on her perspective of the situation. Dotty’s approach made it impossible to really get Heidi’s ideas or contribution.

Rooting into one’s own perspective exclusively led to interpersonal problems in many instances. On the one hand, the Burundian people saw many offers of support as disguised thievery, believing that many supporters were pursuing personal gain at the expense of the people. On the other hand, many community supporters, while genuinely trying to help the people, perceived the people as riddled with lack, need and deficit. Such beliefs from the
BARRIERS AND OPPORTUNITIES FOR BUILDING SOCIAL SUPPORT

Burundians and community supporters crippled the chance for developing meaningful and trusting social support relationships. If in truth the vast majority of community supporters, maybe all, are not scheming the community and if in truth the Burundians are not hopelessly needy and empty, then the perceptions of the other are limited by perspective. When and if each party moves from their current vantage point to see the other in a new way, limiting beliefs may shift and relationships have a basis on which to form.

*Barriers to social support: Sustaining the necessary time and resources to “help”*

Another challenge to the efforts of building a social support network with the Burundian community was the sustainability of ‘helping’. Community supporters who helped often got “burned out” and at times expressed frustration at either the overwhelming needs in the community or what some perceived as entitlement behavior of the Burundians. In other words, some supporters felt they devoted endlessly to helping the community and yet the community took this help for granted and did not try to ‘do their part’. In some cases, it felt like there was no end to the needs and little hope for solutions. There were, and still are, many individuals and groups pledging support to the Burundians. Yet many are worn out by the demands, particularly for transportation and translation.

This sentiment is echoed in a written statement by Catholic Social Services, explaining why the organization was no longer formally supporting the Burundian community:

...Many of the Burundian clients grew up in Refugee camps where they did little to nothing in terms of education and/or work. Unfortunately, resettlement sites were expected to resettle this population using the same model that is used for other Refugee groups. After the normal resettlement period 6 to 8 months, CSS hired a case manager with temporary funds to provide intense case management for some of the Burundians. This was somewhat successful as some of the Burundians were able to get jobs. Some of the Burundians did not comply with the requirements of resources like Job and Family Service, employers, schools, etc. This was a big challenge not only for CSS but for others in the community who reached out to this group. CSS had to close the cases due to lack of funding and non-compliance from some of the Burundians. (Notes from the “Refugee Coalition Meeting” on November 11, 2010 hosted by the Catholic Social Services.)
Staff at Catholic Social Services expressed both dismay and disappointment that despite intensive efforts, many of the Burundian families still struggled a great deal. Yet, the organization decided they could not justify the time and expense needed to meet the needs of the community, especially when the community is “non-compliant”. All the efforts to help the community on the part of CSS met a dead end and could no longer be sustained.

Individuals shared similar experiences. Georgia, for example, began the microenterprise project with gusto, contributing greatly from her personal and financial resources. In the beginning, Georgia hosted the project in her own art studio. Describing the space as cramped, Georgia was impressed that the women nonetheless came religiously every day to learn the craft. It was a “full time job”, typically totaling 40 hours per week for the Burundian women and Georgia. In the summer, the women brought their children who helped with the crafts and enjoyed the camaraderie. Georgia recalls in later interviews how packed, lively and loud the space was in those early days. Women who could not drive were picked up by Georgia in her van and dropped off again at the day’s end. Georgia has six children of her own, so the demands on her time became very large. Still, she was committed to the women and hoped the project would provide the support she felt they needed. After six months, an opportunity to house the project in a new space emerged. An old church was about to be boarded up when Georgia and her husband offered to cover expenses and were handed the deed for $1. The expenses for heat and maintenance were enormous, but the building offered plenty of space for the microenterprise project to grow. The pressures in other areas of her life began to take a toll on Georgia, and still she tried to give everything she could to help the project thrive.

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6 This building was also to be the home for several churches, non-profits, artists and advocates.
Georgia realized in time that the time and money she was devoting to the project was not sustainable and she had to make some difficult changes. In January of 2011, Georgia asked the women to take the bus to get to the new site and eventually reduced the working days from five full days to two half days since the necklace inventory was large and the sales comparatively low. Even with these changes, Georgia felt overwhelmed by the demands on her time and financial resources. Georgia cites this as a chief challenge to her effort and a source of constant frustration that the Burundian women did not seem to recognize how much she gave to the project and had developed a sense of entitlement:

*Now, I used to pick every single one of them up, and take them back home. Oh, gosh. ... but that was not fostering their independence. I was doing exactly what they were doing in the camps. I started seeing an increase in that sense of entitlement mentality. So I had to put a stop to it.*

In working closely with one Burundian family, I personally experienced how overwhelming the challenges can be and how quickly one can become surrounded by a great deal of needs. I was partnering for several months with a Burundian family who were planning to become translators and liaisons for the original project (Abantu Café). Part of the original project was creating social support relationships that included “advocacy” such that the resettlement difficulties faced by the families could be solved in cooperation with American families who have much longer experience and knowledge with American economics, civics, language and culture. What is quite simple for an American family may be an impossible challenge for newcomers. In partnership, people can learn from each other in a mutually beneficial way (Goodkind, 2006). So I entered the relationship with Emily and her family in this manner. What I found within a few weeks is that the needs and requests were overwhelming my time and attention. Within one month of working together, Emily and I were addressing the following needs:

- **ACT tutoring for her eldest daughter**
- **Math tutoring for her middle son**
- **Driving lessons for both parents**
- **Making dental appointments for her youngest son**
- **Procuring a working version of MS Word for her computer**
• Gathering information on specific immigration issues and a ride to Cincinnati to complete immigration paperwork
• Writing references for a job application
• Researching information on Pell grants and local academic programs in psychology
• Researching public housing, section 8, habitat for humanity and other housing options
• Filling out job applications and giving rides to job sites to apply
• Researching small business grant opportunities
• Demonstrating how to use the internet on the computer to locate information

Emily is a determined mother, devoted to helping her family succeed in the US. Most of the things she requested from me were things that were far easier for me to do than for her. For example, simply by having my own car, I could drive her to the places she needed to be and teach her to drive as well, saving her both a great deal of bus fare and time. We would often plan and collaborate in these car trips, so they served a dual purpose. Yet, it was clear almost immediately that there was no way I could assist with all the issues that arose. I reached out to my network of friends and family and was able to get two tutors to work with the kids, one person to donate MS Word, and my husband to teach driving lessons. Even with all this assistance, I often felt the help was falling short of the urgent needs as the family felt crushed by financial stress. Working with Emily’s family, even as a broker to other supporters was not yet a reasonably sustainable effort.

This same issue of sustainability emerged in housing with Mr. Vincent. When the Burundian families moved to Dayton in 2007/2008, most were placed in housing with private landlords. Many were clustered in a single neighborhood on the northwest side of the city. In the beginning, Catholic Social Services (CSS) was supporting every need of the families including rent, as they do with all refugees resettling in the US. As such, the rent checks would go directly from CSS to the landlord. One of the landlords who housed many of the Burundian families was
Mr. Lee Vincent. Once the families were no longer receiving rent assistance from CSS, they were required to pay the rent on their own, though most had not yet acquired jobs. Rent for a five bedroom house and family of ten would typically run anywhere from $500-800 per month. Once CSS stopped paying rent, Mr. Lee Vincent stopped receiving any rent checks. Rather than evict the families, Mr. Vincent visited the homes and explained the need for rent and that he could not afford to pay utilities and property taxes, if none of his tenants paid rent. By November of 2010, seven Burundian families owed Mr. Vincent many thousands of dollars in unpaid rent. In an interview with Mr. Vincent, he explained:

“There are seven families that are behind on rent”, he says, as he flips through the paperwork reviewing the records. “I never ask them how much they have from their jobs or benefits... these families do not understand. I try to tell them, ‘look I need to pay mortgages, property taxes, water bills, electric bills’. But they do not seem to understand... I do not use interpreters because I do not want to embarrass them, so I don’t know they understand... “I cannot evict them. For American families, I have done that because they know they need to pay. But these families do not know- no education, no English, what can they do?” He says he has personally taken some of them to public housing and asked them to apply. But they see that place and don’t want to go.

He says he is very friendly to the families and they to him. The kids love to come to his house and play. He has a large property with swings and gardens. Many times he would say, they are such “good kids”. He also emphasized that they have never caused any problems, so he likes to keep them as renters.

Mr. Vincent is clearly committed to assisting the families. He has informally employed many of the men to help clean up the neighborhood. Paying them each $7 per hour, he gathered a small group to clean up trash and do small projects for neighborhood improvement. He was discouraged when some of them did not come. Mr. Vincent was also a refugee, some thirty years ago, and can empathize with the struggles involved. He is trying to support the community in every way possible. He did not even ask that the families give their earnings from the cleanup
day to him directly, though he hoped they might choose that. He guessed that some of the men
did not come for the clean up jobs because they are avoiding him, due to the late rent. For
months, Mr. Vincent singlehandedly shouldered the costs of housing for the Burundian families,
trying every way he could imagine to keep them housed on Neal Avenue together. It became
financially impossible to continue this way. Ultimately, Mr. Vincent did threaten to evict one of
the families and others left voluntarily. Though he had hoped to support them, he could not
sustain this effort financially.

Here again, mutuality may be a helpful construct to pave a more sustainable way forward.
On the one hand, there are areas where the Burundians may participate more fully in meeting
their needs. This is clear in several of the cases listed here, such as accepting the work Mr.
Vincent offered in neighborhood clean up projects. On the other hand, the community supporters
can move toward a practice of collaboration, rather than single handedly undertaking all the
efforts. This means efforts are approached, not exclusively as ‘helping’, but rather, creating
mutual endeavors where responsibility is shared. In the next section, examples of mutuality show
how responsibility becomes shared and connections are made. This mutuality can form the
backbone of a more sustainable and thriving social support network with the Burundian
community.

*Mutual learning: Movement toward each other*

At the University of New Mexico, Dr. Jessica Goodkind leads a research project known
as the *Refugee Well-Being Project (RWBP)*. This project is founded on past studies that have
shown some of the strongest threats to refugee health emerge in resettlement and is exploring the
effectiveness of mutual learning as part of the integration process. In the US, the health care and
resettlement systems tend to focus on immediate physical needs (Miller & Rasco, 2004;
Kirmayer et al., 2010; Mollica, 2006; USCRI, 2007-2010). Yet for many resettling refugees, some of the most salient challenges are related more to the total disruption of social networks and social roles upon displacement. Dr Goodkind’s program has found that mutual learning is a necessary ingredient in the health care and general well-being of resettling refugees. Through mutual learning, the past experiences of the refugees are accounted for and included, while their identities are validated in the new homeland. These experiences not only build emotional support generally around the community, but also strengthen the overall social support system surrounding the community. Meanwhile, the US students in Dr Goodkind’s research reported that in partnering with the refugee families they not only gain a deep understanding of the culture, resiliency and knowledge within refugee communities, but also learned a great deal about their own lives and the world in which they live (Goodkind, 2005, 2006; Goodkind et al., 2011).

Mutuality can be especially challenging between vastly different languages, cultures, experiences, knowledge, beliefs and skills. In the case of Burundians in Dayton, like the refugees with whom Dr. Goodkind works, the entire landscape of the U.S. in place, time and custom is initially foreign to the people. In some sense, Burundians have no choice but to learn to “swim in this new sea”. On the other hand, those supporters trying to collaborate with Burundians are not in a ‘Burundian sea’, so to speak, and so face no immediately apparent need to learn a new way to swim. And yet, there are some notable instances where mutual learning occurred in Dayton nonetheless, by happenstance or design. And many of these instances occurred when Daytonians moved toward those places and times where the Burundians feel most at home. In other words, when American supporters go to where the Burundians are at home, a collective openness to learn about each other and work together emerged.
In the microenterprise project, for example, Georgia recalls fondly the early days of the project. She describes all the women congregating with their children in the cramped space of her art studio. While everyone’s hands were busy rolling paper for crafts, a space for open and trusted conversation emerged. The Burundian women and children would ask questions about holidays, like Halloween, and share the humor that comes from cultural oddities and differences. Songs and dances were shared. While originally Georgia ordered or brought food for everyone, eventually she suggested everyone bring a dish to share. She felt it was a wonderful chance to experience what they all had in common, while also learning about another culture’s preferences and peculiarities. For example, all the women were delighted to realize rice and beans were common favorites and yet prepared completely differently. These experiences became bonding for the women at the time, and Georgia recalls that in those days there had been much laughter and devotion surrounding the project. In this case, Georgia created a space in her studio that encouraged all the women to be free and open by welcoming food and conversation familiar to the women.

Another example of this connection was through Sara Glass who learned through the community leaders about existing goals and skills in the Burundian community. While the Burundians did lack many of the skills vital to participation in an industrialized economy, such as written and numerical literacy, most had been skilled farmers their entire life, with extensive knowledge for growing food and caring for animals. Sara partnered with the local Metroparks “Grow with your Neighbor” urban gardening initiative and soon had four formerly vacant plots plowed in the city. Burundians were thrilled to see these vacant lots in their neighborhood transformed into land on which they could grow food. Perusing colorful seed catalogues, the Burundians pointed to photos of familiar crops, asking what they could grow in Dayton. There
was much learning needed to get accustomed to a cold weather, four-season climate as opposed
to the equatorial climate to which they were accustomed. Many in the community bemoan with
wry smiles the inability to grow home favorites like cassava and mangoes. But the community
has now grown other familiar crops like squashes, beans and corn for four years running. While
this small-scale agriculture is not yet exclusively providing a livelihood for the Burundians, that
possibility is growing.

Urban gardening and farming is a helpful example of the value in including assets as part
of collaboration. People involved in developing urban gardens focused not on the job skills the
Burundians lack or the dearth of available jobs in Dayton, rather Sara, Linda from Metroparks
and the Burundian community members all appreciated that Dayton is full of available land and
the community not only possesses the desire but also the essential skills for growing food. It has
also offered a chance to Daytonians involved to learn new methods of growing from the
Burundians, such as the “African Hoe”, which is a centuries old tool excellent for tilling the
ground. When the community requested purchase of these tools, no one in Dayton knew where
to get one or what the purpose was. The community bought some materials at the hardware store
and fashioned their own, and showed how efficient these tools were for tilling the land prior to
planting. When tilling one small plot of land, several Americans had gas-powered rototillers that
proved ineffective on the gnarly land. When one of the Burundian leaders reached for the hand-
fashioned hoe and began breaking the ground with it, two of the Americans took up the hoes as
well. Laughter broke out immediately as the three men tilled the ground with these instruments.
Everyone recognized the humor that this technology hand-fashioned together with butter knives
at the hinge, was a superior tool for this situation than the noisy and seemingly powerful
rototillers. Whether or not anyone will decide to use an African hoe in his or her own garden is
aside the point. The true learning was to witness the resourcefulness and self-sufficient approach the community took in making these familiar hoes themselves and to recognize the relevance of this technology in the context of the Burundian farm. These kinds of experiences give Daytonians the chance to see the people in a fresh way, not as empty vessels, lacking life skills, but rather as industrious, resourceful people with a host of skills gained through a life of hard work and survival. This is not to claim that the Burundians as individuals or a community are flawless. It is simply to appreciate the complete picture of who the people are and the recognition of what they may contribute to Dayton as a whole. In a critical way, the gardening project was developed around the knowledge and places where the Burundians already felt ‘at home’. Initial findings point to moments of personal connection and bonding, though the substance of relationships and depth of learning in such instances is a study for future research.

Another dimension of moving toward the people is going to “when” the people are. In other words, an entering into the distinct temporality of the people creates rhythm and connection where there was once little calibration. Such constructs like planning meetings and project development are foreign to the Burundian community whose sense of time traditionally relied on seasons and the sun, rather than clocks and calendars (Malkki, 1995). As such, one of the frustrations identified most often by community supporters was the lateness or forgetfulness of the Burundians when it was time to meet or get to work. Living in the US, clock time will continue to be an essential learning for the community and there is already evidence that many in the community understand this concept. For example, each day that the women came to the microenterprise project, they had to catch the bus coming and going, ensuring not only that they arrived on time, but also that they returned home in time to greet their children after school. While the community is learning to operate on clock and calendar time, the natural rhythm
remains more fluid and spontaneous. As such, one of the most meaningful ways of connecting to people has emerged in moments of going to where people already are and opening a discussion in ‘real’ time. For example, when Linda from the Metroparks organized a feedback meeting regarding the urban gardens, she asked a community supporter, Bambi, to call the community together to meet at five o’clock on a Friday. Linda and Bambi arrived at the church right on time and waited in the doorway with the pastor of the church. Time ticked by and not one person came to the meeting. After 30 minutes, Bambi said, well, “let’s walk out there and see who we see”. Rounding the corner on the road behind the church, a young Burundian girl on a bike and two women chatting on a front porch waved in recognition of Linda and Bambi. Standing in the vacant lot in the center of the neighborhood, Linda and Bambi spoke with the little girl about school. The women on the porch sauntered over and there were hugs and happy greetings all around. Soon, two more women and a young man came over. Within ten minutes a car full of people pulled up and more men joined the group, albeit from a slight distance. When Bambi asked where everyone was for the gardening meeting, the women looked around at each other confused, and laughing slightly with heads bowed. It was unclear whether they had forgotten or never realized there was a meeting that day. Regardless, as everyone stood there it was notable to recognize that while the planned meeting around the corner at the church was ill attended, walking out onto the street brought forth half the community within ten minutes. Everyone stood around conversing in the vacant lot about such topics as how Betty’s new dryer was functioning, what the Kirundi word for five “o’clock” might be, an upcoming tutoring program for the children after school and finally some feedback on the gardens. While Linda still held a more formal garden meeting the following week, this spontaneous visit in the street began the process.
In this way, this example shows a movement toward the people in both place (going to their neighborhood) and time (spontaneously).

Another similar incident occurred when a group of college students arrived in the neighborhood from Wittenberg University. They came to tutor the kids and play games while the parents gardened. The volunteers assembled in the church to get the space set up for some arts and crafts and games. Despite loads of phone calls, emails and fliers advertising the event, none of the kids showed up. So the college students wandered outside to the street. Within a few minutes a couple of small boys came out of their house with a soccer ball. “Do you play soccer?” one of the bolder boys asked the college students. And a mini game emerged in one of the vacant lots instantly. Children started trickling in from all over, on bike and foot. Soon a teenager came out of one of the houses and said “come sing with us”. The students filed into a house that was full of young girls, all practicing for the choir. Makeshift drums were fashioned from wooden pails and tree branches for drum sticks. The choir broke into one of their energetic songs, singing and dancing to the point where the once silent college students began dancing and clapping and cheering as well. The faces of the Wittenberg students were awestruck to be invited to this beautiful chorale ensemble, so spontaneously. For the Burundian girls, it happened to be their weekly choir practice and they decided to invite the students to join the singing. It was striking that the young girls felt so free and trusting to invite the students they had never met to join in their practice. They seemed truly delighted by their visitors and abundantly self-assured in that space. The entire afternoon, the Burundian youth and college students played games, sang songs, shared some snacks and did some art projects, mostly outside, while the parents gardened nearby. All of this occurred because the volunteers walked to the neighborhood, rather than wait in the church where the planned event was scheduled. When asked, none of the kids seemed to
have heard about the event but were happy to join in when the Wittenberg students showed up in their neighborhood. These were instances of connection across cultures that happened when the volunteers went where the people already were and the community took a chance to welcome the visitors in.

Indeed, every meaningful meeting I had while working with the community was not planned. Rather, I would express a need to one of the Burundian leaders, such as “I need to speak to the people about x,y,z” and they would say, “let’s go”. Off we would drive to the house of someone in the community and sit down in their home for a conversation. This drop-by spontaneity always appeared welcome and perfectly acceptable to the people. Every time, we would be offered Amandazi (Burundian donuts) or even a full meal if available. Equally often, a steady stream of Burundian visitors would show up at the house for a visit, beginning with the familiar knock on the door and exuberant greetings shared to each person in the room. No one waited to be invited in as the knock was followed immediately by entry. As a community outsider, just being in the home also seemed to demonstrate my respect of the people. Indeed, I met many people in different settings and always felt most connected to people in their own homes. While we might meet and chat for four hours and decide on a handful of things, the presence of being together in the home and sharing food was bonding for the relationship. For example, when the microenterprise project was closing due to some of the tensions among the women, I visited Mama VG in her home to discuss Abantu Café and how she might participate in the future. When Ivory (Burundian leader and translator) and I arrived, along with my two kids, Mama VG came running out of her house, arms extended for a hug. My son was asleep so she laid a blanket on the couch for him to sleep. Within 10 minutes, she served up plates of sardines, vegetables and rice, along with Amandazi and water, to everyone. We stayed the entire
afternoon, discussing various issues. Ivory and Mama VG chatted about community happenings. Throughout the visit, six adults and ten children came and went. At one point the noise level in the small space was so loud I could hardly hear the girl next to me telling me about 8th grade math. I reflected that the space in the home was truly Burundian and the people appeared most assured and content here. I had seen people in many settings with many different people. So much of what I have learned about the community came not from formal public spaces such as churches or other gathering spaces, but largely from these spontaneous home visits. Who the people are changed depending on where we were and my ability to connect to them depended on entering a fluid temporality. This can add greatly to the shifting of perspective and belief toward a mutual understanding. Small, localized acts such as these may be the fodder for building a robust and lasting social support network as part of the long-term health and well-being of the Burundian community in Dayton.

A prerequisite toward mutual learning is a belief that one can learn something from the Burundians in Dayton. Throughout the course of this research there were many instances that offered helpful glimpses into what strengths, beauty and skills exist in the Burundian community that may lead to improved understanding of not only the problems and solutions that exist, but also ways that Dayton may learn and grow from the perspective of a community from such a profoundly different background. Learning from the Burundian people becomes not only a benefit to the city, but also a critical part for building sustainable social support and consequently the long-term health of the Burundian community. While community supporters sometimes focused on the deficits of the Burundians in Dayton, the field experiences in this research can expand the perceptions of the Burundians beyond need and lack, revealing a great deal of skills, beauty, hopes, ideas, competencies and possibilities in the community.
There are several areas where the Burundian community is now thriving in Dayton. One example is the Burundian Cultural and Education Association (BCEA), a local community organization formed by and for the Burundian community in Dayton. In its stated mission, the BCEA (n.d.) says:

*we aim to preserve cultural heritage among Dayton's Burundian community, facilitate cultural exchange with larger community, and support the well-being and integration of African immigrants into American life.*

Toward this end, the BCEA hosts monthly meetings to pursue educational and cultural endeavors in the community, including Kirundi class for community supporters, participation at Dayton’s World A’Fair, a drumming group and a farming project now known as the Amani project. Meetings of the BCEA are run by the people and anyone can request a topic or raise a concern. Women and men both voice ideas and opinions, despite the oft-cited problems of gender discrimination in the community. There is typically much laughter and camaraderie during the meetings. At a recent meeting, the community had to make several decisions about cooking at the World A’Fair. The leaders of the group had bought some deep fryers for making Amandazi, the Burundian donuts. A lively discussion about how to prepare the donuts ensued, opinions about the fryer size and function aired amidst much focus and also plenty of laughs. This environment had the feeling of security and familiarity that allowed each participant the ease of voicing opinions and reaching conclusions. Open to community supporters, the BCEA offers an opportunity for Daytonians to collaborate with the community in a setting that is built on norms of mutuality. Some of the concerns that community supporters faced in the past, including the feeling that the Burundians did not always express themselves or are void of their own opinions and ideas, are disproven in the BCEA meetings. This is another example to of
“going to where the people are” as the meetings are typically well attended with home grown standards for developing a discussion and making decisions.

When one begins to learn from the community, it becomes apparent the wealth of skills embodied by the people, though not all of these are necessarily worth much in the local job market. For example, as one community supporter (Georgia) pointed out, most of the people speak 4-5 languages, including French, Kirundi, Kinyarwanda and Swahili. Many are learning a 5th language: English. When it comes to Burundians, English as a Second Language is a misnomer. When this observation is juxtaposed with the routinely stated beliefs that the community has ‘no skills’, it is clear that the skills that do exist are often overlooked. This is not to say that fluency in east African languages is a particularly marketable skill in the current Dayton economy. It is only to recognize that the community members do in fact have skills. Another community supporter pointed out that speaking so many languages was born out of an extremely taxing and violent history. Colonization and war forced people to learn new languages for survival. Here again, we see a possible new dimension to people: learning new languages to survive requires a character of courage, strength, and resiliency.

In addition, several Burundian and Rwandan leaders, and community members as well, appreciate the community cohesion and neighborliness of the Burundian people. They noted that, despite some divisions, by and large the people live and breathe community and cooperation. They help each other with childcare, food, and transportation. A particularly insightful example of this is in the garden project. Some American community supporters were suggesting that it would be best to make plots for each individual family, so that there was accountability and personal responsibility for tending the plot. One of the Burundian leaders (a community
supporter) discussed this with the community. The community actually giggled at this suggestion, not understanding why this would ever work. The supporter explained:

*This [individual plots] is not our way. We cannot separate. We will all do the work and we will all share the food. You see, our people are like that. We will always do this work together. It does not make any sense to the people to do it any other way (Burundian leader personal communication, February 2012).*

There is a high degree of efficiency, care and practicality to the communal model. In a more individual-based culture gardeners may encounter problems with a collective plot, wondering who gets what vegetables. Questions such as ‘how many hours did this person work, and so how many pounds should they get’ are likely to emerge. Yet, in the Burundian culture, collective endeavors would be the accepted practice. Everyone will get the amount of vegetables they need. If one person did not work as much as the others perhaps that is due to a family situation or due to the large number of children in the family. If someone is simply shirking their duty, they will be approached and the collective will call for their involvement, perhaps sending an elder to speak to the person. In the end, rather than each family growing ten crops in smaller plots, the community can grow large swaths of crop collectively to be shared, reducing work, redundancy and cost, while increasing produce. Here again, many community supporters did not observe collectivity and community as a “life skill”. Yet this ability to work collectively, when recognized as an asset, is a direct response to some of the challenges the Burundian community faces in Dayton, as well as a potential response to some of the social problems highly individualized cultures like the US face. This notion is articulated in this story shared by one community supporter:

*Here in the US, your neighbor you don’t talk to. There is an old white man down on this street. He is alone. He has this house and it is big and there is no one there. He is sick and no one is visiting. In our culture, the first person you go to is your neighbor, because they live close. Your neighbor is your first friend...When you know each other you are able to share the good things and difficult things.*
The burden is lessened when you can share with many (Burundian leader personal communication, December, 2010)

This statement suggests that the “old man” would be cared for in Burundi. The traditional culture is one of care. You rely on people and people on you. In the US, the problems brought on by independent living are apparent in such cases as care of senior citizens. The Burundian culture of neighborliness, while certainly not practiced to perfection by any means, offers possibilities of how to care for each other. This story takes the possibility one step beyond. Contributing through the gifts of who the people are not only sustains the Burundian people, but also may offer fresh solutions to local Dayton social problems.

This neighborliness bears out in the hospitality of Burundian culture discussed in pervious sections. Sitting in the homes of many different families, there was always a constant coming and going of other community members. A knock on the door and instant entry meant someone coming to discuss a problem, work on a car, borrow something or just have a conversation. Handshakes of greeting and welcome, an open chair and food or drink was always offered to each person who entered. Upon entry, every visitor will take the time to personally greet each person in the room. This hospitality and community herein is not only support in and of itself for the community members, but also offers community supporters insight into ways to engage with the community in the places where the people feel at home. The possibility to enter the Burundian world of spontaneous gatherings in homes, not only connects supporters to the community in meaningful ways, but also offers supporters the opportunity to learn from a new way of doing things.

These communal ways are not particular to the Burundians in Dayton. Much has been written about the Afro-centric philosophy of Ubuntu, which is an ethics of responsibility and care for the other, be it neighbor, traveler, family or friend:
Ubuntu is borne out of the philosophy that community strength comes of community support, and that dignity and identity are achieved through mutualism, empathy, generosity and community commitment. The adage that ‘it takes a village to raise a child’ is an African wisdom borne from an understanding and way of being aligned with the spirit and intent of Ubuntu (Swanson, 2007).

The intrinsic value of this philosophy has been cited as a direct response to many of the social problems faced by more individualistic societies like the United States (Jackson, 2010; Caracciolo & Mungai, 2009; Battle, 2009). Some of the anecdotes shared in this research are glimpses of the ubuntu ethics within the Burundian community. When this is included as part of the understanding of who the Burundian community in Dayton truly are, a more sustainable and healthy support system can emerge. This is another way to “go to the people”.

Finally, acknowledgement on the part of the community supporters that they are moving toward the community also bonds the relationship and builds trust. Learning greetings and simple phrases in Kirundi, for example, is a simple yet profound gesture to the people. Greeting someone in Kirundi, “Amahoro! Amakuru?” always brings on looks of shock, delight and ultimately encouraging responses. This simple act says to the people, I see you and I value who you are. Much like visiting a home, this act goes to where the people are, creating an opportunity for trust, mutual learning and ultimately the bonds of social support to emerge.

In summary, there is a wealth of knowledge and experience that community supporters and Burundians can learn from each other. In some sense, the demands of living in the U.S. and the presence of American dominated places, language and customs compel Burundians to learn from Americans. And this learning will certainly help the Burundians thrive in their new homeland. For community supporters wanting to support Burundians, a helpful practice is to go to those spaces colored by the community’s temporality, norms, language, and values. Some of these spaces have been explored in this section, such as people’s homes, BCEA meetings,
learning Kirundi, the farm and gardens and a willingness to meet spontaneously. This is not to suggest the customs and norms of Burundians are stagnant or unchanging. Certainly living in the US for four years has evolved many of the community’s customs and norms. And this is part of the learning. As research has suggested, mutual learning becomes a foundation for trust and close relationships (Goodkind, 2006; Goodkind et al., 2011) and fosters the kind of reciprocity, care and unconditional support necessary for effective social support (Finfgeld-Connett, 2005; Stansfield, 2006). Social support, particularly for marginalized groups like refugees, is protective of long-term health (Marmot & Wilkinson, 2006; Miller & Rasmussen, 2010). The construct of social support and its relationship to health helps elucidates opportunities for improving the support efforts and subsequently the health of Burundian refugees in Dayton. Including practices for mutual learning and understanding amidst the extensive efforts of giving practical support, help complete the whole structure necessary for effective and sustainable social support as a key component of health care needed for a community whose past social support was eliminated.

**Discussion**

This project was based on research showing that social support relationships are both particularly critical to the sustained health of people, while also particularly elusive to forcibly displaced populations, such as the Burundians in Dayton. Social support offers an ecological approach to health and healing, as it is instrumental in coping with post-displacement stressors faced by refugee communities. Some of the barriers to forming social support relationships in Dayton include issues of trust and fears between people. In addition, the “burn out” rate of community supporters was high in many situations. Meanwhile the perceptions that the Burundians and community supporters held about each other were often limiting and even hurtful in some situations. The persistent presence of these barriers was problematic in the
development of social support. For one, effective social support is an “advocative interpersonal process” (Finfgeld-Connet, 2005). In order for a community supporter, for example, to advocate for a Burundian person, the supporter’s intention must be trusted, or else the advocacy will be construed as something else, such as manipulation as cited often in the examples throughout this paper. In addition, the process of social support is interpersonal in nature, and built upon norms of reciprocity, all tailored specifically to a context (Finfgeld-Connett, 2005; Stansfield, 2006). In the case of Burundians and Daytonians, the limited perspective each had of each other often seemed to warp the interactions. Particularly, the persistent narrative themes noted throughout the paper, that Burundians are entitled, excessively needy and lacking skills of any kind, not only undermines the ability of community supporters to learn from or listen to the Burundians as worthwhile partners, it also severely increases the frustration and suspicions floating around the Burundian community. Every time the Burundian children are labeled orphan or the adults are labeled “needy refugee”, the people wonder what advantage the community supporter is trying to gain by, as they see it, exaggerating and flaunting their poverty and vulnerability.

Here is where the construct of mutual learning becomes compellingly helpful. As studied in Dr. Goodkind’s practice of “Learning Circles” at the University of New Mexico’s Refugee Well-Being Project, mutual learning builds trust, vastly improves interpersonal understanding, and transforms “helping” relationships into collaborative relationships. Collaborative relationships place the responsibility for problem solving in the hands of Burundians and supporters alike, greatly increasing the sustainability of social support as the time, effort, learning and resources become shared. In this way, mutual learning becomes a practice and a process of building the reciprocity, interrelating, trust and context specificity necessary for effective social support.
As seen in many support efforts undertaken in Dayton, there are notable examples of mutual learning. In those instances where Burundians and community supporters moved toward each other, connection and collaboration became possible. Movement toward the other offered promising possibilities for new methods of working together. For example, when both groups took up a share of responsibilities, the project became more effective. When the women in the microenterprise project all began bringing food, rather than relying on Georgia for lunch, many enjoyable meals were shared in the project which is an experience remembered fondly by all involved. Another example were the urban gardens, a project that was based on the skills people already mastered and therefore the Burundians readily took up responsibilities for growing the crop, while community supporters helped purchase seeds and tools. Shared responsibility may help overcome the “burn out” problem among overwhelmed community supporters. In these ways, the work, the learning and the outcome are all shared.

Another area of movement toward the other is in perception and belief. Both groups have voiced perceptions of the other that are limited to an anchored and singular viewpoint. Movement toward listening and observing the other’s perspective offers a new way of understanding. For Americans learning from the Burundians in particular, it is revealing to “go to where the people are” in space, time and practice. Americans otherwise never happen to be in the Burundian “sea”. On the contrary, the Burundians are always faced with American life and struggling to understand and integrate by necessity. Americans on the other hand can miss the chance of learning in a Burundian context, as there is no obvious necessity to do so. There are many ways to go to where and when the Burundians in Dayton are. Whether this is visiting someone’s home or attending the community meetings with BCEA or learning greetings in Kirundi, the experience of being where the people feel more “at home” offers the best chance to
learn from the people. This sometimes also means going to where the people are in time, which tends to be far less clock and calendar oriented than the US way. Communication often, not always, happens during spontaneous home visits or during the BCEA meetings that are conducted by and for the Dayton-based Burundian people, in a more culturally familiar way. This does not mean to excuse the Burundians from learning the “where and when” of Dayton and US life. Just by living in the US, most spaces the Burundians visit are already operating in a way familiar to Americans and they are learning how to integrate into these spaces. For example, most community members now know the bus schedule and ride the bus with ease to their destinations. And still, the Burundian community has carved out a few islands in their new homeland that are most familiar and imbued with their ever evolving norms, language and culture. Notably, these are not norms and customs homogenized across Burundians worldwide. These are likely specific hybridizations evolved in the Burundian community specific to the time and place of migration to Dayton, Ohio. For community supporters to also enter these spaces with respect for the people, to listen and learn, can help create the bonds and connections that are foundations for social support relationships. Such relationships can complement the other important aspects of sound health for the Burundian community, such as direct medical care and health education. Modeled on the work of such research-practitioners as Dr. Goodkind, social support efforts for Burundians in Dayton can be built upon a context specific to the Burundians in Dayton and norms of reciprocity, care and trust, the underpinnings of social support that is protective of refugee health and well-being (Kirmayer et al., 2010; Stansfield, 2006).

Finally, once perceptions of and beliefs about each other develop, perceptions too about the possibility of collaboration can move forward. For example, many community supporters and Burundians alike have lamented the scarcity of jobs in Dayton and cited this regularly as an
impossible stumbling block. Yet Sara Glass and Linda from Metro parks, among others, recognized abundance. For better or worse, Dayton is a town with loads of vacant lots, leased by the city to gardeners. Meanwhile, Dayton is considered a “food desert” as there are no grocery stores in town that sell fresh fruits and vegetables. Slowly this is changing and the urban garden movement is part of that transformation. In seeing these opportunities matched with the skills of the people, Sara and Linda became supporters for the community to pursue their gifts of food growing in the context of Dayton. There have been plenty of pitfalls and shortcomings along the way, but these bring many lessons and the people remain highly committed to a future in agriculture. Sara has now devoted several acres of her own farmland to the people and together, the community has raised nearly $5,000 in grants and private donations. This also ties back into a fundamental health issue: locally grown food has recently received great attention as a critical component of sustainable health for the environment, communities and individuals.

Movement towards each other shifts the goals from helping the most needy to collaborating and capacitating each other. Research on various programs for refugee resettlement have shown some promising results in the methods already existing (Goodkind’s Refugee Well-Being Project, Mollica’s Harvard Program in Refugee Trauma, Hubbard’s Center for Victims of Torture, see Stepakoff, and the many examples in Miller and Rasco’s Mental Health of Refugees). At the present, the project once called Abantu Café is now part of the Amani Farm Project (Amani means peace in Swahili). This effort is attempting to implement some of the learning from the past 22 months. The project is set at the farm and brings Daytonians and Burundians together in ways that are familiar and comfortable to the spaces, temporality and customs of all involved. Whereas the initial Abantu Project had the same goals of building meaningful and sustainable social support with the Burundians, the second phase of the project
shifted in orientation and location. On the farm, the people are comfortable and operate in familiar time. Sharing experiences thus far, have shown some evidence of bonding and connection. For example, in tilling the land and encountering a snake, the Burundians and Daytonians had to deal with a very real fear in real time. This experience became remarkable and is often referred to as a shared moment when reminiscing about the work done. Enormous learning about each other emerges when working side-by-side, attention devoted to a shared task. When problems are encountered, people must work together to solve them and the expertise lies somewhat in favor of the Burundians in this case. This ensures that the Burundians do not remain as pupils in the American context, but are integral to the process as people whose past experience, present ideas and future hopes are included. In this way, the future research in this project attempts to move one step beyond many of the existing ecological models for integration. These existing models show the value of including refugees’ knowledge, experience and values into the integration process). This study of Burundians in Dayton is looking into one additional step, as described here by Dr. Goodkind (n.d.):

Refugees’ culture, experiences, and knowledge are valued and utilized in the promotion of their well-being. By design, the program has the potential to incorporate the strengths and needs of refugees while addressing multiple aspects of the empowerment process.

The Amani project adds to this model with the substitution of one word: changing their to our.

Undoubtedly, as is clear in the literature review on refugee health, displaced persons face particularly thorny health issues upon resettlement in new countries. Including the displaced persons experiences and knowledge in addressing these health issues has been shown to be very effective. In addition, the research question for the next phase of this project is to look at the outcomes of collaboration among Burundians and supporters. In particular, can collaboration that is based on mutual learning and listening, inclusive of each participant’s knowledge and
experiences, not only further diminish the strength of stressors impacting the health of the Burundians, but also have a positive impact on the well-being of supporters? In other words, mutual learning shifts beyond helping the refugees with their resettlement into elevating efforts for our collective health and well-being. A farm is an interesting place to begin, as the very tangible project of healthy produce has a clear connection to public health. The research will consider, what ideas and solutions become possible with such a wide diversity of perspective and skills? Furthermore, how does the inclusion of all voices ultimately impact the sustainability of health projects such as this one?
References


BARRIERS AND OPPORTUNITIES FOR BUILDING SOCIAL SUPPORT


Miller, K., & Rasmussen, A. (2010). War exposure, daily stressors, and mental health in conflict and post-conflict settings: Bridging the divide between trauma-focused and psychosocial frameworks. *Social Science & Medicine, 70*(2010), 7-16.
BARRIERS AND OPPORTUNITIES FOR BUILDING SOCIAL SUPPORT


http://www.refugees.org/resources/for-refugees--immigrants/burundian-resources/

Appendix A: IRB Approval

ACTION OF THE WRIGHT STATE UNIVERSITY
EXPEDITED REVIEW
Assurance Number: FW A00002427

DATE: December 9, 2011
TO: Colleen Q. Saxen, PI, Grad Student
    Cristina Redko, Ph.D., Fac. Advisor
FROM: B. Laurel Elder, Ph.D., Chair
SUBJECT: WSU Institutional Review Board
         Administrative Approval RE: Colleen Q. Saxen, PI, Grad Student
         SC# 4457 #1
         'The Abantu Cafe: Cultivating Mutual Learning Between African Refugees and Local Women in Dayton'

This amendment was approved by RSP per Board Policy of May, 1994. This amendment does not contain significant changes nor does it impact on subject treatment/care. This amendment resulted from:

- Team Member Change
- Question Addition
- Procedure Addition
- Material/Strategy Change
- Procedure Removal
- Minor Correction

Comments:

Administrative approval was given to use ethnographic data from field observations and conversations with community members to be included in the research study.

The Board will be notified of this action at the next regularly scheduled meeting.
Wright State University IRB Modification/Amendment Request

Date: October 24, 2011  
WSU HSP/SC# 4457

Principal Investigator: Colleen Q. Saxen  
Phone: 703 599 7241  
E-mail: equinlan10@yahoo.com

Title of Research Project: The Abantu Café: Cultivating Mutual Learning between African Refugees and Local Women in Dayton

1. Is the sponsor initiating the proposed amendment?  
☐ Yes  ☒ No

If yes, provide the amendment number ____________

2. Mark all that apply:

☐ Administrative change (check appropriate box(es) from following list):

☐ Addition or deletion of study team members

☒ Addition of procedures that do not significantly increase risk to subjects

☐ Removal of research procedures resulting in a reduction in risk to subjects

☐ Addition of nonsensitive questions to unvalidated survey or interview procedure

☐ Addition of or revisions to recruitment materials or strategies

☐ Administrative changes (e.g. correction of spelling, grammar or typographical errors) to approved documents

☐ Protocol revision(s)

☐ Consent form revision(s)

☐ Other (specify) ____________

3. Describe modification/amendment (use/attach additional pages if necessary):

The PI requests the use of ethnographic data from field observations and conversations with community members to be included in this research study. This data enhances the research project by giving a fuller picture of the context in which Abantu Café will take place.

4. Will there be any increased risk, discomfort or inconvenience to the subjects?  
☐ Yes  ☒ No

If yes, provide detailed explanation and justification as an attachment

5. Do you consider the requested changes to be ☒ Minor (minimal risk) or ☐ Substantive?

October 28, 2009

Received Time Dec. 6, 2011 11:12AM No. 2021
This memo is to verify the receipt and acceptance of your response to the conditions placed on the above referenced human subjects protocol/amendment.

These conditions were lifted on: 05/25/2011

This study/amendment now has full approval and you are free to begin the research project. If this is a VA proposal, you must still receive a letter of approval from the Research and Development Committee prior to beginning the research project. This implies the following:

1. That this approval is for one year from the approval date shown on the Action Form and if it extends beyond this period a request for an extension is required. (Also see expiration date on the Action Form)

2. That a progress report must be submitted before an extension of the approved one-year period can be granted.

3. That any change in the protocol must be approved by the IRB; otherwise approval is terminated.

If you have any questions concerning the condition(s), please contact Jodi Blacklidge at 775-3974.

Thank you!

Enclosure
BARRIERS AND OPPORTUNITIES FOR BUILDING SOCIAL SUPPORT

RESEARCH INVOLVING HUMAN SUBJECTS

SC# 4457

ACTION OF THE WRIGHT STATE UNIVERSITY EXPEDITED REVIEW
Assurance Number: FWA00002427

Title: 'The Ababa Café: Cultivating Mutual Learning Between African Refugees and Local Women in Dayton'

Principal Investigator: Colleen O'Shea, Ph. Grad Student
Cristina Redko, Ph.D., Fac. Advisor
Department: Community Health

Expeditied Category: 7

The Institutional Review Board has approved the use of human subjects on this proposed project with conditions previously noted. The conditions have now been removed.

REMinDer: 4EA regulations require prompt reporting to the IRB of any changes in research activity, changes in approved research during the approval period may not be initiated without IRB review (submission of an amendment), and prompt reporting of any unanticipated problems (adverse events).

Signed Chair, WSU-IRB

Expedited Review Date: April 08, 2011
IRB Meeting Date: April 18, 2011

This approval is effective only through: April 7, 2012
To continue the activities approved under this protocol you should receive the appropriate form(s) from Research and Sponsored Programs (RSP) two to three months prior to the required due date.
If you do not receive this notification, please contact RSP at 775-2425.
INFORMED CONSENT FORM FOR A RESEARCH STUDY

STUDY: The Abantu Café: Cultivating Mutual Learning between African Refugees and Local Women in Dayton

INSTITUTIONS: Wright State University (WSU); Dayton, Ohio, USA

INVESTIGATOR: Colleen Quinlan Saxon (WSU, MPH)

ADVISOR: Dr. Cristina Redlack (WSU)

Purpose of the Study:
You are invited to take part in this research study about building new relationships between Africans and Daytonians. At Abantu Café we will learn about each other and hope to recognize the value of each other's gifts. We want to know if these relationships will improve the feeling of "belonging" among African refugees. We also want to know if participants are learning about each other during Abantu Café.

Procedures
You are being invited to participate in this research project. This project will bring together women from Africa and women from Dayton and will take approximately 4-5 hours per week for six weeks. You may be planning and preparing meals as well as participating in the sharing of meals together. Further, you will be participating in group sessions called Learning Circles. These groups will have both African and Daytonian participants so we will share experiences and stories with other women on a variety of topics.

You are not required to participate in this research and may stop participating at any time without any negative consequences.

If you agree to participate in this study we may:
• Interview you in a small group before and after the study. We will ask you about your perceptions of other women and your feelings about the project.
• If you choose to participate in any way, you will have access to the final results from the research team or by emailing c.quinlans@gmail.com

Benefits:
• The study is free of any costs to you other than your time.
• You may receive no benefit from participating in this study. However, you may learn from and form relationships with women from other countries and feel a greater sense of 'belonging' in the community.

Risks, Inconveniences and Cost:
Nothing in this study involves risks to your health. If you do experience emotional distress, you may contact Colleen Saxon for assistance. Other than your time there is no additional cost to participating in this study.

Privacy
All information from this study will remain confidential and coded (like a secret). All documents will be locked away during the study and destroyed when the study ends. The results of the study may be published in an academic journal, but you will not be identified.

Form continues on back
Questions
Please ask questions about anything you do not understand, now or in the future. You can ask the study team who will be present at every session, or you can email equitaim10@yahoo.com to speak with the investigators mentioned at the top of the form. You can also contact the Wright State University Institutional Review Board 937/775-4482 if you have questions about your rights as a participant in research.

Volunteering
You do not have to be in this study if you do not want to. Even if you decide to join now, you may stop being in this study at any time. You can decide now, or you may join the study up to 2 weeks after today if you want to.

If you sign your name below, it shows you agree to participate in the study.
Signature of participant: ____________________________
Name: ____________________________

Signature of investigator, or person authorized to obtain consent: ____________________________
Name: ____________________________

All of this form must be completed on the same date, which must be stated here /

If the participant is not able to read, we need the signature of a witness here: ____________________________
Name: ____________________________

We will give you a copy of this form to keep.
BARRIERS AND OPPORTUNITIES FOR BUILDING SOCIAL SUPPORT

INYANDIKO YO KWEMERA GUKOREGWA ITOHOZA

ICIGWA: Café Abantu: Guteza imbere imishikirana hagati y’impunzi z’abanyafurika n’abafasoni batuye muri Dayton
IKIGO: Wright State University (WSU, Dayton, Ohio, USA)
UTOHOZA: Colleen Quinlan Saxen (WSU, MPH)
UMUYANAMA: Dr. Cristina Redlo (WSU)

Intumebho y’icigwa:

Ingene Miorwa:
Muratumiwe kwitabira iryo tohoza. Uyu mushinga uzakoraniriza hanwe abafaseni baturuka muri Afurika n’abafasoni batuye Dayton.
Bikazafita lilorego s’amashaka ake legera kurikirwe kuri kuri ku nozi. Bikazamana indwe 6.
Murashobora giteganya no gitegura ibisungurwa tukalitsangira. Kandi tusaja duhuriza mu migwi izaha igiwe n’Abanyafurika hanwe n’abatuye Dayton, bakazasingira Inkuru r’amuzeke y’ivyvo bacyemwo ku angingo zitandukanye. Kuza muri ici cigwa ntawo ari agahato kandi kutarisho ntasco vyagutwaro rwoze.

Niba rero wenweye kuzitabira iryo tohoza, turashobora:
- Kukubanza ibiibwa mbera na nyuma y’icigwa. Tuzakubaza uko ubona abandi bafasoni kimwe niro y’ivyungumira kuriki ici cigwa.
- Niwemera kwitabira lico cigwa, abakijwe bazakumenyesha iryo cigwa catokojo canke babiganturome na makete. Ushobora kubibona urungitse email equinalian16@yahoo.com

Akamoro:
- Icigwa nta mahera kibasa, n’igihire canyu gusa.
- Nta gibendo kandi kizatangwa
- Brashoboka ko ntse y’umurono muri lico cigwa ariko murashobora gikuramo kumenyana n’abandi bafasoni bava ku mico byemwe, namwe kandi mumunwe musicalo m’umwango muri baturanyi.

Ingasarura n’Ikiguzi:
Nta kinta na kimwe muri ici cigwa kizabangamira amagama yanyu. MUrutumise hari ikibazo mugize mwevaza Colleen Saxen. Uretse rero igihire canyu, nta kindi bizabasiba.
BARRIERS AND OPPORTUNITIES FOR BUILDING SOCIAL SUPPORT

Ibanda:
Iryo muzavuga muri ico cigwa bizaba ari ibanga. Inyandiko zose zizabikwa kure kandi zizataburwa icigwa gihere. Ibizoza muri ico cigwa bizotangazwa mu kinyamakura c'ubushakashatseti ariko nta mazina y'abantu azatangazwa.

Ilibazo:
Mushobora kubaza ikibazo ku kintu kosa mutumva haba ubu canke mu gihé kiirimé. Mushobora no kubaza abajejwe iryo tohoza muri buri naka canke muloba namagagama kw'irisima. Mushobora kandi guhamagana iyo numero: 937-775-4462 n'ta hari ilibazo mafite ku vyereleye iryo tohoza.

Ubushaké:
Ntabwo ari theko kwitabira iri tohoza, urigimo ubu urashobora kurivamo igihe kosa usakate. Urashobora no gafata icemero ubu canke mu kiringo c'indwi 2.

Nushira ikidodo kuri uru ruhape uza wemeye kwitabira iryo tohoza.

Ikidodo c'uwitabira: ___________________________ Izina: ___________________________

Ikidodo c'utohoza canke ___________________________ Izina: ___________________________

Udım uwyemerewe

Ibi vyose biri kuri uru ruhape bigomba koozwa kuri uyu muni, hakaba icemero kane ________ / __________/20__________

Nimba uwitabiriye ici cigwa atazi gusoma,

hakemwe ikidodo c'icobona ___________________________ izina ___________________________

Tuzurungikira kopi y'iri nyandiko
INFORMED CONSENT

Study: Café Abantu: Promotion of relationship between African refugees and US
Women residents of Dayton

Institution: Wright State University (WSU, Dayton, Ohio, USA)
Principal Investigator: Colleen Quinlan Saxon (WSU, MPH)
Faculty advisor: Dr. Cristina Redko (WSU)

Purpose of the study:

You are invited to participate in this research study which will build the relationship between people from Africa and residents of Dayton. We will be working in small groups that will give us the opportunity to know one another and consequently share weaknesses and strengths of our respective cultures. We also focus on knowing if working in these small groups will allow African refugees to feel like they are in their home country. We will also learn if those who will participate in Abantu café study will have their relationship increased.

Methods:

You are invited to be part of this study group that will bring together women from Africa and American women, all residents of Dayton. This research study will be 6 weeks long and participants will meet from 4 up to 6 hours every week. Food will be shared within our respective small groups composed of African and American women living in Dayton, who will be sharing stories on different life issues they went through. Participation in this research study is voluntary, you may choose to not participate without consequences.

If you agree to participate in this research study:

- You will be asked to answer some questions before and after the study. You will be asked to give your opinion on how you see other women and what you think about this study;
- You will be informed of the results from the study and you will potentially be sent these results via your mailing address or getting them by sending a request to the email equilalan10@yahoo.com.

Benefits:

- Other than your time there is no additional cost to participate in this study;
- No payment is planned for participation in this study;
- There will be no direct benefit to you from participating in this study. However, from this research study you will have the opportunity to meet and to know other women from different countries, an occasion for you to feel like you are part of your neighbors' community.

APPROVED 6-15-11

[Signature]

Date: 4-7-13
Risks and Cost:
Nothing in this study involves risks to your health. In case you may have a question, you should contact Colleen cquinlan10@yahoo.com. Other than your time there is no additional cost to participate in this study.

Confidentiality:
All information from this study will remain confidential. During the study all documents will be locked in a safe place and destroyed when the study ends. Results from this study will be published in a research magazine that will not include names by which you could be identified.

Questions:
You may ask questions on every single detail of this study today or in the future. You may also ask questions to the research team in our weekly meetings or you may call them on their cellphones. Feel free to also call 937-775-4462 if you have some questions on this study.

Taking part is voluntary:
It is completely voluntary to take part in this study. If you don't choose to take part in the study you can withdraw at any time within a period of 2 weeks from today.

By signing below you are indicating your willingness to participate in this study.
Signature of participant: __________________ Name: __________________
Signature of investigator, or person authorized to obtain consent: __________________
Name: __________________
Date: __________/________/20________
If the participant does not know how to read, we need the name of the witness
Signature: __________________ Name: __________________

We will send to you the copy of this informed consent.
Appendix B – List of Public Health Competencies Met

<table>
<thead>
<tr>
<th>Specific Competencies</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Domain #1: Analytic Assessment Skill</strong></td>
</tr>
<tr>
<td>Defines a problem</td>
</tr>
<tr>
<td>Determines appropriate uses and limitations of both quantitative and qualitative data</td>
</tr>
<tr>
<td>Selects and defines variables relevant to defined public health problems</td>
</tr>
<tr>
<td>Identifies relevant and appropriate data and information sources</td>
</tr>
<tr>
<td>Evaluates the integrity and comparability of data and identifies gaps in data sources</td>
</tr>
<tr>
<td>Applies ethical principles to the collection, maintenance, use, and dissemination of data and information</td>
</tr>
<tr>
<td>Partners with communities to attach meaning to collected quantitative and qualitative data</td>
</tr>
<tr>
<td>Makes relevant inferences from quantitative and qualitative data</td>
</tr>
<tr>
<td>Obtains and interprets information regarding risks and benefits to the community</td>
</tr>
<tr>
<td>Applies data collection processes, information technology applications, and computer systems storage/retrieval strategies</td>
</tr>
<tr>
<td>Recognizes how the data illuminates ethical, political, scientific, economic, and overall public health issues</td>
</tr>
</tbody>
</table>

| **Domain #2: Policy Development/Program Planning Skills** |
| Collects, summarizes, and interprets information relevant to an issue |
| Identifies, interprets, and implements public health laws, regulations, and policies related to specific programs |
| Articulates the health, fiscal, administrative, legal, social, and political implications of each policy option |
| States the feasibility and expected outcomes of each policy option |
| Decides on the appropriate course of action |

| **Domain #3: Communication Skills** |
| Develops a plan to implement policy, including goals, outcome and process objectives, and implementation steps |
| Communicates effectively both in writing and orally, or in other ways |
| Solicits input from individuals and organizations |
| Advocates for public health programs and resources |
| Leads and participates in groups to address specific issues |
| Uses the media, advanced technologies, and community networks to communicate information |
| Effectively presents accurate demographic, statistical, programmatic, and scientific information for professional and lay audiences |
| **Attitudes** |
| Listens to others in an unbiased manner, respects points of view of others, and promotes the expression of diverse opinions and perspectives |

| **Domain #4: Cultural Competency Skills** |
| Utilizes appropriate methods for interacting sensitively, effectively, and professionally with persons from diverse cultural, socioeconomic, educational, racial, ethnic and professional backgrounds, and persons of all ages and lifestyle preferences |
| Identifies the role of cultural, social, and behavioral factors in determining the delivery of public health services |
| Develops and adapts approaches to problems that take into account cultural differences |
| **Attitudes** |
| Understands the dynamic forces contributing to cultural diversity |
| Understands the importance of a diverse public health workforce |

| **Domain #5: Community Dimensions of Practice Skills** |
| Establishes and maintains linkages with key stakeholders |
| Utilizes leadership, team building, negotiation, and conflict resolution skills to build community partnerships |
| Collaborates with community partners to promote the health of the population |
| Identifies how public and private organizations operate within a community |
| Accomplishes effective community engagements |
| Identifies community assets and available resources |
| Develops, implements, and evaluates a community public health assessment |
| Describes the role of government in the delivery of community health services |
### Specific Competencies

#### Domain #6: Basic Public Health Sciences Skills
- Identifies the individual’s and organization’s responsibilities within the context of the Essential Public Health Services and core functions
- Defines, assesses, and understands the health status of populations, determinants of health and illness, factors contributing to health promotion and disease prevention, and factors influencing the use of health services
- Understands the historical development, structure, and interaction of public health and health care systems
- Identifies and applies basic research methods used in public health
- Applies the basic public health sciences including behavioral and social sciences, biostatistics, epidemiology, environmental public health, and prevention of chronic and infectious diseases and injuries
- Identifies and retrieves current relevant scientific evidence
- Identifies the limitations of research and the importance of observations and interrelationships

#### Attitudes
- Develops a lifelong commitment to rigorous critical thinking

#### Domain #7: Financial Planning and Management Skills
- Develops and presents a budget
- Manages programs within budget constraints
- Applies budget processes
- Develops strategies for determining budget priorities
- Monitors program performance
- Prepares proposals for funding from external sources
- Applies basic human relations skills to the management of organizations, motivation of personnel, and resolution of conflicts
- Manages information systems for collection, retrieval, and use of data for decision-making

#### Domain #8: Leadership and Systems Thinking Skills
- Creates a culture of ethical standards within organizations and communities
- Helps create key values and shared vision and uses these principles to guide action
- Identifies internal and external issues that may impact delivery of essential public health services (i.e. strategic planning)
- Facilitates collaboration with internal and external groups to ensure participation of key stakeholders
- Promotes team and organizational learning
- Uses the legal and political system to effect change