

**The wellbeing of refugee children in an early childhood education context:
Connections and dilemmas**

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Abstract

The provision of a context that supports the wellbeing of refugee children in Australian schools is important to their resettlement. The early childhood years are the optimum time for intervention programs for refugee children and thus outcomes for these children (Modica, Ajmera & Dunning, 2010), yet there is a paucity of research respecting this age group. Furthermore there is a need for research on contexts that are supportive of refugee children (Cameron, Frydenberg & Jackson, 2011). This case study focused on eight refugee children enrolled in one school's new arrivals program, their parents and relevant school staff. The research aimed to 1) identify the practical and emotional connections offered that were perceived by parents and staff to be supportive of 5-8 year old refugee children's wellbeing, and 2) identify dilemmas in fostering connections. To determine the school's level of supportiveness, children were observed and assessed using the South Australian Department of Education and Child Development's, *Reflect, Respect, Relate, Wellbeing Scale*. The school was found to be supporting these children's wellbeing at a mid to high level. Parents and staff identified beneficial connections such as the bus system and bilingual School Service Officers. Dilemmas included creating emotional connections, particularly those related to cultural values. Recommendations include ways to strengthen children's wellbeing through improved community integration.

Keywords: refugee children, early childhood education, wellbeing, connections, dilemmas

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Introduction

Many Australian schools receive refugee children. Teachers and schools want to provide educational contexts that foster the wellbeing of these vulnerable children (Boerema, 2006). Zembylas (2010) calls this imperative an 'ethic of care', that emerges in response to the particular circumstances that these children and their families face. Zembylas describes this quality as focusing on '*trust, social bonds, cooperation, caring relations, and responding to needs*' (p. 234), and situates it within the characteristics of inclusive and democratic societal practice. Such an ethic is directly in contrast with the contemporary government policy climate and corresponding attitudes in the wider community. An ethic of care is particularly important in the developmentally sensitive first years of education (Reed, Fazel, Jones, Panter-Brick & Stein 2012), yet little is known about the characteristics of schools that are most supportive of young refugee children and their families (Waniganayake, 2001).

The 1951 Refugee Convention, states that a refugee is someone who, *owing to a well-founded fear of being prosecuted for reasons of race, religion, nationality, membership of a particular social group or political opinion, is outside the country of his/her nationality and is unable, or owing to such fear, is unwilling to avail himself/herself of the protection of that country* (United Nations Human Rights Commission, 2012). In this study the term 'refugee' indicated a person who in the preliminary years after arrival in Australia is on the journey towards community inclusion (O'Brien, 2006).

From a socio-cultural perspective, educational programs focusing on the wellbeing of refugee children need to consider them in context (Rogoff, 2003), that is, they must include family and background (Burns, 2009; Rogoff, 2003; Szente, Hoot, & Taylor, 2006). Children's wellbeing is concerned with good physical health, feeling happy, and with having positive social relationships. It is about the over-arching state of a child, and is complex and multi-dimensional (Mayr & Ulrich, 1999). It is a potentially useful term because of its broad scope in describing everyday functioning. The Department of Education and Children's Services (DECS) (2010, p. 6) defined it as, *the combined physical, social, emotional, cognitive and spiritual state of being*. Wellbeing can be assessed in children by observing their behaviour and interactions with others, and their physical environment. DECS (2010) used the terms 'strength', 'confidence' and 'openness' to describe wellbeing qualities in children, including three domains: happiness and satisfaction, social functioning and dispositions.

The early years of schooling form a critical foundation to later educational success (Briggs & Potter, 1999). In their new country, refugee families seek a life of stability and success for their children (Burns, 2009), however they are likely to have been subjected to a multitude of traumatic events (Burns, 2009), which may have shaped their development (Perry, 2008; McFarlane, Kaplan & Lawrence, 2010).

Schools may be an effective social agency for the delivery of primary and secondary preventive services to refugee children (Jackson, 2006; Sanders, 2008; Szente, Hoot, & Taylor, 2006). Within schools the wellbeing of refugee children can be supported through practical and emotional connections, such as academic assistance, social and psychological support and the opportunity to play. It cannot, however, be assumed that schools are an entirely supportive environment. Many obstacles may be encountered by refugee children, their families, and teachers, including the psychological and social issues faced in adjusting to the school and wider community. Furthermore, supportive education environments are created by teachers who have an ethic of care that involves more than sympathy for refugee children. Such teachers respect and have empathy for refugees and a strong sense of social

justice which impels them into caring action. The purpose of the present study was to identify the practical and emotional connections supportive of refugee children, and also the dilemmas encountered in establishing home-school connections.

Experience of trauma is common amongst refugee children. Both pre and post arrival, their developmental processes may be disrupted (Ehnholt & Yule (2006). Fazel and Stein (2003) found that more than a quarter of the 5-9 year old refugee children in their sample had three times more significantly greater psychological disturbances, including emotional symptoms and peer problems than the control groups of other ethnic minority and Anglo-Australian children in the same school.

It cannot be assumed that all refugee children and families suffer from trauma, however, it can be expected that refugee families, like all migrants, go through a period of transition (Keller 1970, cited in Stein, 1981). Loss of extended family and ethnic group support systems contribute to feelings of isolation, anxiety and depression (Steel, Silove, Phan & Bauman, 1999 cited in Burns, 2009). Additional social pressure is inflicted on refugee families in the form of racism, whereby community members do not see refugees as included in 'our' community and part of 'us'. Instead they may regard them as strangers to whom an ethic of care involving caring actions does not apply (Zembylas, 2010). Adolescent former refugees reported that racism was a reality of their schooling and affected their day-to-day existence (Brough, Gorman, Ramirez & Westoby, 2003). Similarly, Dooley and Thangaperumal (2011) found refugee adolescents experienced harassment regarding their emergent English expression, resulting in exclusion.

Language is a key challenge. During resettlement learning the English language is essential. Hakuta, Butler and Witt (2000-01, cited in Burns, 2009, p. 156) suggest, *it is estimated that in optimum circumstances it takes three to five years to develop oral proficiency in English and four to seven years to gain academic English proficiency*. In South Australia children enrol in Intensive English Language Programs, formerly called New Arrivals Programs (NAP) for 18 months to learn English, then transition into a suitable mainstream class (DECD, 2012). Discontinuity between home and school languages is another pressure on children (Brough et al., 2003; Burns, 2009).

Previous research has investigated resilience in refugee children. Maegusuku-Hewett, Dunkerley, Scourfield and Smalley (2007) found two key psycho-social factors that were attributed to older refugee children identified as resilient: 1) psycho-emotional and personality characteristics; that is, optimism, patience, confidence and hope, and 2) social factors, including an affirmative role or a positive value for their cultural identity. Protective factors found to enable refugee children at risk to become more resilient included: a supportive family milieu, external social services which reinforce a child's coping strategies and a positive personal disposition (Fazel & Stein 2002). These researchers noted that school offers a structure within which refugee families can make links with the broader community and also learn resilient behaviours.

The DECS Reflect, Respect, Relate (RRR) Wellbeing Scale (2010) focuses on young children's wellbeing, providing a tool for early years education sites to assess *the overall quality of relationships and the learning environment* (p. 17). Using this scale, observers gather in-depth information on individual children's happiness and satisfaction, social functioning and dispositions within a school site. Consistent with the broad scope of the RRR scale, previous research in a NAP setting found that structural, whole school approaches formed a strong foundation for positive and inclusive education for refugee children (Pugh, Every & Hattam, 2012).

There is a need for research focused on the experiences of refugee children aged 5-8 in Australian school settings, beyond enrolment (Christie & Sidhu, 2006). This study investigated the aspects of the school context supportive of wellbeing. Its aim was to investigate a school with refugee children 5-8 years, with a focus on their wellbeing, as assessed by the RRR Wellbeing Scale, the practical and emotional connections of this educational context that parents and school staff perceived to be supportive of refugee children's wellbeing, and the dilemmas that arose in fostering home-school connections.

In this study practical connections were defined as formal arrangements in a school that assist refugee children and their families to adjust and gain a positive sense of identity and community (Maegusuku-Hewett, Dunkerley, Scourfield, & Smalley, 2007). Emotional connections were defined as the links between school staff and families, including once-off interactions or ongoing relationships that they perceived to be helpful.

Justification of methodology

Case study can produce in-depth data on one site, providing insights that are not possible in other research designs (Stake, 2000). In this study children's wellbeing was assessed in a school which has specific characteristics and thus can be called an *integrated system* (Stake, 2000). Case study is the process of investigating an integrated system (Stake, 2000). Certain features are within the boundaries of the system, in this study refugee families and emotional and practical connections. These features are contextually significant and comprise a specific, unique, bounded system.

The use of both observational and interview methodology allows for a broader understanding of a school community. Research on refugee children needs to include the voice of refugee families (Cameron, Frydenberg & Jackson, 2011; Mitchell & Ouko, 2012; Yohani, 2010), while acknowledging that perceptions of children and their parents may differ. Interview methods were employed in Szente, Hoot and Taylor's (2006) study of refugee children and families. Interviews provide parent and school staff insights into the connections of the educational context that are supportive of refugee children's wellbeing, and also the dilemmas faced.

The following research questions were posed:

1. Do refugee children's wellbeing scores indicate that this educational context is supportive of them?
2. What practical and emotional connections do school staff and parents identify as supportive of 5-8 year old refugee children's wellbeing in this educational context?
3. In developing educational contexts that are supportive of refugee children's wellbeing what dilemmas do school staff and parents identify?

Method

Design

This research was undertaken as a case study. Using a convenience sample, the study collected data from three perspectives; researcher observation, parents and school staff.

Participants

One boy and seven girls participated aged 5-8 enrolled in NAP classes and attending the school for a minimum of one term. The school was a Reception to Year 7 state primary school in a lower SES outer metropolitan suburb. The children came from three families: Families 1 and 2 from Burma; Family 3 from the Democratic Republic of Congo. Three parents participated; Family 1 – the father, Family 2 – the mother, and Family 3 – the father.

Five school staff working with the refugee children, (three NAP teachers, the NAP principal and the NAP counsellor) also participated.

Measures

Wellbeing scale

The children were observed using the RRR Wellbeing Scale (DECS, 2010). The RRR Wellbeing Scale includes a checklist for six separate observations for each child. The checklist comprises three domains (p. 68).

1. Happiness and satisfaction – Children are confident in themselves...enjoy fun and humour and engage in experiences with enthusiasm. *They happily express their needs, ideas and feelings, [and] engage in activities, interactions and play. They take considered risks.* Children recognize and regulate their own emotions.

2. Social functioning – Children show social initiative. They reach out and attract others, are receptive and responsive to stimuli or suggestions and negotiate effectively. Children are *assertive, flexible and manage their emotions.* They cooperate and accept boundaries.

3. Dispositions - Children are *open and receptive, find pleasure in exploring and are alert, aware, and curious. Children persist with optimism and are not easily distracted when concentrating.*

Within each domain is a set of signals or indicators of behaviours which are representative of the specific domain.

The Wellbeing Scale rating sheet has six boxes, one for each observation session, which outlines the context of the observation, and a rating level of 1-5 for each domain. The scores from six observations of each individual child are used to calculate the mean score for the setting. *A mean score of 3.5 is the lowest acceptable score of a supportive environment* (DECS, 2010, p. 71).

Parent and school staff interviews

Interviews included demographic questions about the families and their views regarding how the school context, particularly the practical and emotional elements supported children's wellbeing. Parents were asked: *What school structures have you found to be supportive of your children's overall wellbeing?* Staff were asked: *In the education setting in which you work, are any emotional connections in place to support refugee children and their families, and if so what are they?*

Interviewees were also asked about their perception of each child's wellbeing in relation to each domain, and the dilemmas they faced in supporting children's wellbeing at the school.

Procedure

Once permission was obtained from relevant bodies, information letters and consent forms were distributed. Prior to the data collection the researcher spent 3 x one hour visits in each classroom to build comfortable relations with children (Shenton, 2004).

The children were observed using the specified RRR procedures over a full day in their educational context. The researcher used the wellbeing checklist to observe each child for five minute periods, three times in the morning and in the afternoon.

The researcher interviewed parents and school staff at pre-scheduled times, with an interpreter for two parents. At interview commencement the researcher reminded the

interviewee that should they feel uncomfortable they could withdraw from the study. Interviewees' preferences regarding whether their responses were to be handwritten or audio-recorded were observed, and all except one were audio-recorded. The interview with the father from Family 3 was recorded in note form then later checked and amended by him. All interviews were then transcribed and coded by emergent content areas.

Data Analysis

Wellbeing scale

The RRR rating system provides for each domain to be assessed as low (l), medium (m) or high (h), calculated against the possible number of indicators that could be scored. For example, for the domain *Dispositions*, comprising 15 indicators, a score of 0-5 would be low, 6-10 medium, 11-15 high. Each domain, Happiness and Satisfaction, Social Functioning, and Dispositions, had its own separate rating ranges, allowing the researcher to apply the context of the observation to the rating. For each of the six observations a wellbeing score of 1-5 was attributed. This score represented the number of low, medium and high scores in the combined domains (see Table 1). An overall wellbeing score was then calculated by taking the average of the wellbeing scores for the six observations.

Table 1: Wellbeing scores given for observation rating combinations

Observation ratings for each domain (Happiness & Satisfaction, Social Functioning, And Dispositions)	Overall wellbeing score for observations in each domain
low + low + low	1
low + low + medium	2
low + medium + medium	3
medium + medium + medium	3
medium + medium + high	4
medium + high + high	5
high + high + high	5

School staff and parent interviews

School staff and parent interview data were coded post hoc using thematic analysis (Braun & Clarke, 2006). The practical and emotional connections identified were; 1) structural, referring to the established programs and systems of the school, 2) school community, including processes and people who support family adjustment to a new life and culture, and, 3) child-focused, activities and programs set up to influence children's positive sense of identity. The dilemmas identified included: 1) emotional connections, specifically difficulties in forming reciprocal relationships between parents and school staff, 2) transition, including cultural and language barriers and financial issues, and 3) wider social context, that is, external factors that impact upon the school's role in supporting refugee families.

The wellbeing scores and interview data sets were then cross-analyzed to identify patterns and significant points.

Findings and Discussion

The presentation of findings and discussion begins with an overview of the school NAP program, then focuses on each child, and related teacher and parent comment. The practical and emotional connections perceived to be supportive of children’s wellbeing, and the associated dilemmas reported in building such educational contexts follow.

The school context

The NAP program offers refugee children cross-curricula intensive English language support. Upon arrival refugee families are advised about NAP schools. When families enrol the NAP schools receive appropriate visa documentation to indicate that the children have been in Australia for less than 12 months, or 18 months for students in Reception and Year 1. NAP class sizes are small and teachers and bilingual school service officers (BSSOs) are trained in teaching new arrival children and understanding trauma (DECD, 2013). The BSSOs work in class to foster learning, supporting children to transition between home language and English.

As a context for children’s wellbeing this school was found to be functioning at a mid to high level of supportiveness. On the Wellbeing Scale child participants scored an average of 3.96 out of a possible 5.

Wellbeing

Table 2: Dimensions of wellbeing scores by child and family

Domain	Child 1a	Child 1b	Child 1c	Child 2a*	Child 2b	Child 3a	Child 3b	Child 3c
Happiness and satisfaction	4.6	4.0	4.3	3.3	4.6	4.6	3.6	3.3
Social functioning	3.3	3.3	3.3	3.0	4.0	3.3	2.6	3.0
Dispositions	3.3	3.0	3.3	3.0	3.6	3.6	4.3	4.0
Well being score	4.3	3.83	4.0	3.3	4.5	4.16	4.0	3.6

* Child’s overall score below the wellbeing cut off, indicating possible risk

At the time of the study, *Family 1* from Burma had lived in Australia for two years. The language predominantly spoken at home was Chin-Burmese. There were three children in the family, all girls, Child 1A – five years old, Child 1B – six years old and Child 1C – eight years old. The father said that the girls loved coming to school, *even when they’re sick or on weekends they want to come to school.*

Child 1A’s father reported that his daughter felt happy about school. He noted, *she wants to learn interesting and new things.* Her teacher said *she loves school.* All staff reported that she functioned well socially with all her classmates. Child 1A’s teacher added that usually she would not talk to new people and often other teachers, stating that *until you become a permanent fixture in the class she is really shy.* However, the principal noted *she probably has more confidence than her sisters.* Her teacher commented: *If she feels like she knows what she is doing then she’ll do it,* adding that she needs frequent confirmation that she is on track. The principal observed: *A lot of our Burmese children are very scared of being wrong, they hesitate a lot in taking chances [and] need to be told that it’s OK to be wrong.*

Insights from Child 1B's father and school staff data were consistent with her wellbeing scores, confirming that Child 1B had a positive attitude towards school. On first arrival the principal reported that she was timid and lacked confidence. Her teacher commented: *With other teachers she is really shy...if she doesn't know them she just won't talk to them.* School staff considered she had become assertive and was an excellent social problem solver. She was reported to be popular with other children. Her assertiveness was often interpreted as bossiness. Her father noted that *if she wants something she wants to get it.* Her teacher commended her as a bright student, well disposed to learning. The principal observed that like her younger sister (Child 1A), Child 1B, needed constant confirmation that she was doing the right thing, however unlike Child 1A, she needed to take more risks.

The principal and her teacher reported that Child 1C was *a really scared little girl when she came to school...very withdrawn and didn't speak for a long time.* Her teacher said she had gradually developed confidence and was able to articulate her ideas both verbally and in writing. Her father likewise noted: *She wants to learn.* The counsellor reported that she was somewhat of a *perfectionist and likes to make sure she has got everything right.* Her class teacher also said that when learning Child 1C would stay with what was safe, possibly out of fear of getting something wrong. Reports of her social functioning were mixed, perhaps because of the variety of contexts in which staff members saw her socializing. Her teacher said *she is not the sort of girl who will take a step on her own,* however the counsellor noted that in play situations she liked to be the leader.

Family 2 were from Burma, and had been in Australia for three years. They spoke Chin-Burmese at home. Two of the family's three children attended the school; Child 2A – 5 years and Child 2B – 7 years. Their mother was interviewed, accompanied by a male Burmese family friend. The mother mentioned prior to the interview process that she did not know much about school support. The interpreter noted that the father usually conducted communication between the school and family.

Child 2A received the lowest overall wellbeing score of 3.3. Comments from the mother and school staff were consistent with these ratings. All reported her to be a happy child. The counsellor observed: *If she was happy then she'd probably be a little more extroverted.* Her teacher said: *She is withdrawn at times.* Her mother and two staff saw the need for her to develop confidence and risk take when learning. The principal raised the point that home help with learning was needed, perhaps from her older sister.

Child 2B received the highest overall wellbeing score of 4.5. She was the first Burmese student at the school. She had very little language support but adopted English quickly. Both parents and staff noted that Child 2B was confident and a leader. Her teacher said she was lively but also dramatic, saying *she has her ups and her downs.* Socially she was outspoken and outgoing. The counsellor also noted *she tries to tell people what to do as opposed to lead.* Her mother noted: *She is happy to come to school, but doesn't want to do any homework.* School staff agreed that her confidence assisted her learning, her teacher reporting that she will do *very well at school.* The principal saw her ability to take risks as a reflection of the resilience embedded in being the first Burmese child at the school.

Family 3, originally from The Democratic Republic of Congo, arrived in Australia two years previously, after spending two years in a refugee camp in Malawi. The family had four children, three of whom attended the school, Child 3A - 5 years, Child 3B – 6 years and Child 3C – 8 years. Swahili was spoken at home. The father was fluent in English, while the mother was learning. The father said that he was studying at university and that the family were active participants in school community cultural events.

Child 3A's father, school staff and her wellbeing results all indicated that she was happy at school. She interacted positively with peers and staff and was eager to learn. The counsellor reported: *she comes to school, sits down... and is raring to go and is just like, 'what are you going to teach me now?'*. Her confidence and outgoing personality were said to allow her to make the most of school life. Her father observed that the positive interaction that occurred between Child 3A and her teachers was an integral reason for her love of school.

All agreed that Child 3B enjoyed school and felt happy and confident there; however their views of her social interactions were mixed. Her father noted that she was timid. While she would play in a group, she also spent a lot of time on her own engaged with puzzles. Her social functioning was rated low, however she was considered by two school staff to be friendly and outgoing. The principal said, *she takes on the mother role*. The counsellor mentioned that at times she conflicted with other children, yet also observed that where once Child 3B used to lie and say, no, no, I didn't do it; she now took responsibility and admitted to her wrongdoings. Child 3B's father considered that her curiosity, logical/analytical thinking and ability to think deeply would assist her academic success. Her teacher reported she was *confident, loves to learn, loves talking*.

Parent and school staff comments about Child 3C were consistent with ratings for his wellbeing. All stated that Child 3C was confident, ambitious and thrived on success. His father considered him to be very literate, that his English was now so advanced he read a lot and persisted. His self-awareness allowed him to be a popular, positive and kind leader. The principal reported he had shown this quality, *supporting other children through transition visits*. His father said his son loved coming to school. The teacher and counsellor noted that he particularly enjoyed cultural events and school discos, music and dancing.

Observations of all these eight children revealed that the school was supporting the wellbeing of these refugee children at a mid-to-high level. Despite the adverse and perhaps traumatic contexts in which their young lives had begun, these children were displaying acceptable levels of wellbeing at school, interacting with others and engaging in learning. The school's overall supportiveness of wellbeing (3.96/5) was consistent with findings from previous research on resilience which identified refugee children as highly motivated to do well (Maegusuku-Hewett et al., 2007). In that research, resilience was a marker of both personal qualities and the environment. In the present study the wellbeing scores reflected both the supportiveness of the setting and individual children's ability to adapt to that setting. Maegusuku-Hewett et al. (2007, p. 319) stated: *the institution of school serves a valuable purpose in providing an opportunity for children to maintain focus and hope for a stable and successful future*.

Yet, not all participating children were found to be doing well at school. Child 2A's overall wellbeing of 3.3 fell below the lowest acceptable score of 3.5, indicating possible emotional and coping issues. This score may indicate psychological issues and in turn identity formation problems, consistent with previous research with refugee children (Bash & Zezlina-Phillips, 2006; Fazel & Stein, 2002, 2003).

Practical connections

Parents and school staff identified several structural, community and child focused connections supportive of refugee children's wellbeing, indicating that an ethic of care (Zembylas, 2010) was in practice in this school community.

Structural

The NAP was the school's main structural support for refugee children, with a principal and counsellor dedicated to supporting families to settle. The majority of staff also included BSSOs as an important practical connection, as did Family 2's mother. She mentioned that the BSSO was supportive of her children's wellbeing and said, *she calls [us at home] and is present in meetings.*

The NAP also offered bus transportation to all children enrolled to and from school. All parents interviewed stated that the bus service was supportive. The father of Family 1 reported *we are busy so this helps.*

The benefits of having NAP leadership staff and BSSOs is consistent with previous research; schools have been identified as an integral link between refugee families, communities and resettlement services (Sanders, 2008; Szente, Hoot, & Taylor, 2006).

School community

School staff and Family 3 identified community integration as a practical connection; the school orientation process; an initial meeting with the principal and a full tour of the site and NAP classes. Another such connection mentioned was acquaintance nights where interpreters facilitated communication and explained the school's expectations to parents. One teacher reported: *This year we had [a] PowerPoint presentation, to show things about school; uniforms, what is suitable for a lunch box.* Family 3's father mentioned excursions as a significant practical connection that supported his children's wellbeing, as they gave the children the opportunity to do things in their new community and learn about the city.

Ryan, Dooley and Benson (2008, p. 15), stated *resources are central to the migrant adaptation process*, and resource delivery is dependent on the context and the needs of the individuals within that context. Parent comments indicated that the resources offered through practical connections supported the enculturation of their children, while allowing them as parents to fulfil their needs in a new society.

Child-focused

Participants mentioned child-focused connections as important. One Reception / Year 1 (R/1) teacher commented: *for children we've just started soccer...at recess and lunch time [which] started as a NAP thing and then evolved into trying to get NAP kids and mainstream kids together.* Family 3's father also identified the soccer program as beneficial. He reported that when their family first came, the children saw what other children had and did. It was hard to provide his children with the same, so it was good that the school was doing that. He also reported that they enjoyed peer play and that it assisted with school work and learning and social interactions, *especially with other children who don't speak the same language, as they must learn about taking turns, sorting out problems and sharing.*

The importance of play in learning was also highlighted by the discrepancies between staff perceptions of Child 1C. Observed as confident in play, yet reported as reluctant to take risks academically, she may have benefited from a strengthened play-based approach to learning.

It can be concluded that the structural, community and child-focused practical connections in place contributed to the successful inclusion of these children in the school's program.

Emotional connections

Parents and school staff considered the following emotional connections to be supportive of refugee children's wellbeing.

Structural

Staff identified the following structures as supporting the development of emotional connections. One R/1 teacher mentioned the implementation of child protection curriculum and also the school's Rock and Water Program which supports children with aggressive behaviours (<http://www.rockandwaterprogram.com/>). She noted the NAP children also made transition visits to mainstream classes and their new schools which helped them to feel supported, prepared and settled.

The other R/1 teacher identified the school's buddy system, organised between NAP and mainstream classes, as fostering the NAP children's feelings of inclusion. *It helps them on an emotional level they don't feel like they're segregated and helps them to integrate with mainstream kids.* All parents reported that they found the general friendliness, warm greetings and helpfulness of school staff to be emotionally supportive.

School community

The staff identified the principal and counsellor as providing refugee families with an emotional connection. They initiated home visits, referred families to social services, assisted families to understand necessary processes and helped them when crises arose. The principal mentioned that classrooms were always open, allowing families to drop in to see their children. Acquaintance nights, meetings and multicultural events communicated to parents that the school was welcoming and available to support them.

The R/1 teacher and father of Family 3 both considered BSSOs supported emotional connection as they gave children opportunities to express their feelings and thoughts in their home language.

Child-focused.

Child-focused emotional connections were also reported. Both the principal and counsellor stated that the quality of the classroom environments was integral to children's feelings of wellbeing. As the counsellor said: *In classrooms teachers are really supportive in developing an environment that is calm, safe and secure and has routines and gets away from that fear of a new place and new people.*

To support the emotional wellbeing of new arrivals, children were 'buddied' with someone from their own language group. One teacher said that previously some parents had been against this idea as they wanted their children to learn English quickly. She explained: *We let them sit together for a while. It's a strange place, they don't know anybody, but after a while I move them away. To start I let them speak in their language, but once they develop a bit of English I don't let them speak their language in the classroom.*

The intensive approach of NAP enables children to acquire English quickly. Parents' high hopes for their children assist. Family 1's father said that English proficiency was a priority for his children. The teachers agreed that teaching these children English was critical.

The high priority given to English learning by parents and teachers raises a question about the place of children's home language and culture. Glover (1999, p. 319), argued that the role of early years educators is *to ensure that children are well anchored in all their worlds*, yet when one world is given precedence, fostering biculturalism becomes a challenge. A holistic approach is needed to nurture children's bicultural identity, and in turn wellbeing. To be effective, educators must understand refugee children's lives at school and at home.

Dilemmas

The study also identified dilemmas, principally emotional connections, transition, language and financial concerns, and issues embedded in the wider social context.

Emotional connections

School staff and parents identified dilemmas regarding communication and home support for learning, which had an impact upon effective staff-parent emotional connections. The year 2/3 teacher commented: *Parents often think it's not their job to teach children, [they] think that it's the teacher's job.* Language barriers and lack of understanding made forming emotional connections with families difficult. The role of educators is to support refugee children as they balance their identity through the culturally contrasting contexts of home and school (Bash & Zezlina-Phillips, 2006). The study also revealed that while many factors affect children's ability to establish a positive bi-cultural identity, home support for learning contributed. One teacher reported: *I notice the difference between those kids who have support at home and those who don't, as they [the former] advance quicker.* The teachers and principal perceived parents' valuing of education impacted on children's learning. The mother of Family 2 noted that Child 2B loved coming to school, *but doesn't want to do any homework.* One explanation beyond many children's reluctance to undertake homework may have been underlying inconsistency between the contexts in which Child 2B was learning. To successfully undertake homework she needed to transfer her learning from school to home.

Also, her parents' limited English language reduced their capacity to support her homework. In contrast, Family 3's father reported homework to be an emotional connection. He mentioned that one of his children had brought home a task to draw where they came from and what they could remember. The child drew a picture of their family home which had been burnt to the ground. He considered that this activity gave his child an opportunity to discuss traumatic events. The father said although they are children, *they still have emotions and they still remember.* This family supported children's learning at home. Assisted by the father's English proficiency, homework acted as an emotional connection between parent and child and in turn, the family and the school. Consistent with Rogoff (2003), this child's wellbeing was supported by connections between her home and school contexts.

Transition

In refugee camps children learn ways of life that cause dilemmas. When discussing the school's soccer program, the counsellor mentioned *the view that pushing and punching and kicking are OK to solve an argument has caused many issues. She commented, talking to parents about, well no it's not OK (violence) here and this is how we actually solve problems. I guess that's one of the bigger barriers, I think, just saying, OK well this is how we do things here.* This example is consistent with previous research into trauma, which recognized that ongoing psychological and social issues can result from exposure to traumatic events in the country of origin, during the flight to safety and when resettling in a new country (Bash & Zezlina-Phillips, 2006; Perry, 2008).

The two Burmese parents raised three difficulties. Family 1 said when requests for money for excursions were sent home they were unsure of what it covered. The mother of Family 2 reported language difficulties: *some of the notes are the English version not the translated version, so we don't understand what they mean.* This finding is consistent with past research that found language barriers impeded refugee parents supporting their children's learning and becoming involved at school (Brough et al, 2003; Burns, 2009). Family 3's father noted that a difficulty occurred at the orientation visit. The cost of school uniforms was around \$60, a high cost when the family was establishing. He appreciated the school allowed the family to

pay in instalments. Consistent with Burns (2009), these cultural differences added to the multitude of overwhelming pressures that occur in resettlement.

Wider social context

The wider social context was also mentioned as causing dilemmas in establishing educational settings supportive of refugee children's wellbeing. Staff were concerned about the lack of coordination between the school and other services used by the families.

The principal mentioned that often parents' English classes, so vital to community integration, were scheduled for 9.00am, too early for many parents. To provide refugee families with social and emotional support that meets their needs several studies have recommended intensive collaboration between institutions, including schools, universities/colleges, health and recreational services (Ehnholt & Yule, 2006; Szente, Hoot, & Taylor, 2006). In the present study networks with community services were established, however an integrated approach to education and service delivery could benefit the whole family. For example, English language classes and support services for families offered in collaboration with the school would allow a closer link between the school and new arrivals. Raising another dilemma the counsellor said that racism at school from mainstream and Indigenous children towards NAP children caused issues in the yard. She said that breaking the barriers between the NAP and mainstream mentality was a concern, and that refugee children reported that racism had been a main problem for them, consistent with Brough et al (2003). The counsellor commented that programs, like soccer, have been put in place to address racial barriers, yet due to funding, *maintaining and sustaining this is always a problem.*

This study indicated that this NAP school successfully offered positive support in the child refugee resettlement process. Once refugee children enter mainstream classes the question arises of how they will cope and progress in that less supportive context. The mid to high levels of wellbeing evident among children in this study may be a source of resilience when yet again their lives are shifted.

Limitations

The interviews with the two families from Burma were interpreted by a BSSO, as a result some of the meaning, intention and understanding may have been altered. The wellbeing scale assesses children over six observations in one day. Many variables may affect a child's wellbeing on a particular day. Observing children in this time frame may not provide an accurate picture of their overall behaviour. On the other hand, the scale also captures how the setting is supporting the child's wellbeing. Therefore if a child was having issues on data collection day, the way the setting responded to the child would still provide relevant insights.

It should be acknowledged however that while the RRR Wellbeing scale may be effective in assessing the wellbeing of individual children, more children would need to be included than the eight in the present study to assess the supportiveness of the culture of an entire school.

A larger scale investigation would allow the observation of a greater number of children over a longer time period. It would also have enabled the inclusion of children's as well as parents' voices.

Recommendations

This study may provide a beginning point for schools to understand ways they can support refugee families. Fazel and Stein (2002) noted that school provides a connection between

refugee families and the broader community. The school and parents had established practical and emotional connections, however dilemmas had arisen, principally around intercultural understanding. These recommendations may assist in addressing some of the difficulties that parents and school staff encounter in supporting refugee children's wellbeing, and in the process building an inclusive whole school approach (Pugh, Every & Hattam 2012).

Regular and updated training for all staff may assist their understanding of the refugee experience and the cultures in the school community (Strauss & Smedley, 2009). In their study of the education of refugee children in Australia, Christie and Sidhu (2006) highlighted education as a process of engagement with children and families, based on unity, reciprocity, respect and care and a commitment to equity. Consistent with this view, home visits by school staff may strengthen their connections with families, perhaps supported by a school community liaison officer. In this study parents and most school staff regarded home visits as positive, and said that they could be expanded in the future. Such visits are likely to validate refugee families, and perhaps ease the anxiety of resettlement (Sanders, 2008).

Staff implementation of the Wellbeing Scale may strengthen staff awareness, providing deeper understanding of the areas in which individual children require extended support. For example, Child 3B's happiness and satisfaction at school were at a high level, whereas her social functioning was much lower. Although this child received a high wellbeing score overall, her learning could be enhanced through planning experiences which provide opportunities to learn pro-social strategies.

The implementation of homework clubs has been successful for older refugee children across Australia (Australian Refugee Association, 2009). Such clubs could be modified to be relevant to the learning of children 5-8 years. The establishment of an onsite early years learning exchange involving parents and teachers may help to make home and school learning more consistent. In collaboration, refugee parents and teachers could develop their emotional connections and mutual understanding of ways to foster children's learning, and assist children to apply their learning across contexts (Risko & Walker-Dalhouse, 2009).

Children's peer relations are critical to their wellbeing at school. To fully implement an ethic of care throughout the school additional work may be needed beyond organizing integrated events such as the lunchtime soccer games, so that connections are established between individuals and groups of children. Curricula and pedagogies may be needed to build 'empathetic engagement' (Zembylas, 2010) and thus understanding in mainstream classes.

Conclusion

The present study provided insight into the school-based connections that may be important to the wellbeing of young refugee children. The study identified practical connections that were crucial to families and school staff in supporting the resettlement process of refugee families and the wellbeing of their children. Emotional connections were found to be the most difficult to establish, specifically those concerned with transition, language barriers and the wider social context. Ethic of care approaches are likely to integrate school and the wider community, and may be a way forward.

Addressing the dilemmas identified in this study requires input from all concerned; refugee families, school staff, and other agencies working with refugee families. Also beneficial may be additional funding for learning programs, home visits and the integration of services.

This study investigated a single early childhood context. The findings may provide professionals working in NAP and other schools with an understanding of individual learner

wellbeing in context, and provide a basis at their school to address dilemmas and form meaningful and effective connections with refugee children and families. Further studies are, however, needed.

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