



**GENDER  
AND DEVELOPMENT  
IN PRACTICE**



Co-funded by the  
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# **Women in Diaspora**

## **How do they meet and how are they approached in society?**



**Report 2018**

# Women in Diaspora - How do they meet and how are they approached in society?

## Workshop October 2017

GADIP (Gender and Development in Practice) arranged a workshop with guest associations working on women's health, violence and integration. The aim was to jointly discuss activities and experiences of working together with migrant women.

The workshop was initiated within the framework of the project "The Europe We Want". It is funded by Erasmus+ and focuses on female migration and adult education.

The overarching aim of this project is to support officers in migration authorities in order to create new ways of approaching female migrants.

### Organizers:

Ulla Björnberg and Nancy Contreras, on behalf of GADIP; Gender and Development in Practice and Erasmus + Programme of the European Union.

This report has been written by Henrietta Jendle revised by Ulla Björnberg, Edmé Dominguez and Nancy Contreras.

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**Bodil Frey** – Projektledare

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**Elizabeth Franklin** – Barnmorska

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**Gun Holmerz** – Verksamhetsansvarig

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**Lina Lundborg** – Samordnare

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**Nancy Contreras** – Projektledare

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**Patricia Olaya** – Universitetslektor

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Göteborgs Universitet

**Rosette E Kabandize** - Founder/Director

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**Sara Claesson** – Verksamhetsutvecklare

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Arbetarnas bildningsförbund Restad Gård Vänersborg

**Susanne Rasek** - Jämställdhetsstrateg

Hederskultur ur ett annat perspektiv Borås Stad – Stadsledningskansliet Borås



Göteborgs  
Stad

## Complementary education for health workers

### Patricia Olaya

In order to strengthen employability of new arrivals who have acquired a healthcare education in their home country the Swedish government has commissioned training programs to two hospitals in Stockholm and Gothenburg. Persons with a health care education in sending countries (from non EU countries) are offered complementary education and practices. The financing is temporary and will last three years.

Within the training program participants also transfer knowledge to Swedish healthcare workers about typical problems and diagnoses among immigrants.. This education is aimed at providing full speed in learning Swedish. They also have to learn a more complex level of Swedish language, a condition for obtaining professional legitimacy. Patricia's role is to coordinate the complementary education with teachers on Swedish language and cultural adaptation in order to increase the learning process so the individuals can practice their profession. They have to learn a more complex level of Swedish language in order to be approved for a work ID.

The complementary program lasts two terms with three different placements and several examinations. In this program, the Unit for academic language (ASK institution) cooperates.

Patricia discusses the difficulties that the migrants have to face when learning the language and find employments. One of those difficulties is the segregation, which makes it hard for these persons to use the language in their everyday life and therefore forget much of it. If they do not manage to make themselves understood in the healthcare contact with the patient, then they can be annulled from work.

Another difficulty is the high segregation on the workplace, which limits the person from learning proper Swedish. Segregation is the result of prejudices of collaborators. This fact can be frustrating for the migrants that have a higher education level from their home countries but who need to practice as an assistant nurse. They feel that they are not taken seriously and they feel diminished by the Swedish society.

Patricia's ending question is whether the Swedish society is using the migrant's competence in a good way after the complementary education or is the complementary education just another way to test their knowledge?

## Cultural interpreters in women clinics

### Elizabeth Franklin

The hospital (NÄL) that is running this program has a goal to provide a good, safe and satisfactory healthcare for foreign-born/migrant women. The purpose is to hire some women who can act as intercultural mediators in order to develop personalized healthcare. Cultural differences can be a limitation in offering personalized care. Migrants /refugee women have experiences and life histories which can be valuable to know in connection with how these women experience the given healthcare and support. Two kinds of skills are used in the program: An intercultural interpreter that is professional and impartial but can be part of two party conversation and have a personal approach to the patient. An intercultural mediator acts both as interpreter and a language supporter for those who have limited understanding of the Swedish language and need support in contact with the healthcare providers when they, for example, are to deliver a child. In order to increase the understanding between the individuals, a very important factor in cultural mediation is to think about how different concepts, metaphors etc. can be used in the communication.

## Equal start in life

### Bodil Frey

Another project is “taking place within an Association - Homeless, pregnant and early motherhood support to new mothers. The association started in 2012. It is a voluntary organization financed for a three year period by the Swedish “Inheritance Fund”(Allmänna arvsfonden). The idea is to integrate delivery services with the help of “Doulas” (cultural interpreters). The “Doulas” assist with translation in connection with deliveries of a child and other kinds of support. A doula differs from a professional translator- she is professional but provides personal and continuous support. Doulas learn about the problems, fears, diagnoses and insecurities as new comer in Sweden meets. They often see a pattern of issues that migrant mother face, such as: isolation, mistrust for the Swedish society, PND, lack of support in the house hold (especially for those women that are single mothers or widows) or lack of support from the Swedish healthcare in those cases when the woman suffers of injuries after the delivery.

The doulas work at a Family center where migrant mothers are invited to attend information meetings about different support that the Swedish society can offer, to seek help in their contact with different actors in the healthcare system, parenting support so those who do not speak the language can benefit of helping actions and integrate easily. In order to help the migrated mothers in their role as new mothers and help them learn how different things use to be done when having a child, the doulas are doing home visits too.

## Teenage mothers empowerment organization

### Rosette E Kabandize

Rosette is a nurse and midwife with a training in psychiatry. She migrated from Uganda in 1990s and she started the organization in 2015 with the aim to help young mothers to reach a higher level of empowerment and independence. This is to be accomplished through counselling and help to the girls to widen their perspectives and seek social advice and someone to lean on. In Sweden, the girls are facing different kind of problems as isolation, they do not agree with their parents, their partners ends the relationships and many end up in need of psychiatric care. Girls from other countries who get pregnant might have been sexually abused, raped and have a child as a result. Girls that have been exposed to this kind of traumatic experience are facing stigmatization, guilt and isolation. They have little or no social support from authorities or family. The young mothers and their children are exposed to risks, both in terms of physical problems, mentally and socially. They risk poverty, isolation, low self-esteem, have higher exposure to violence and other kinds of abuse.

## Violence prevention work in collaboration with municipalities and associations

### Lina Lundberg

Prevention of violence against women and girls is at a global level now regarded as a phenomenon which must be counteracted at all possible levels. Laws have been introduced in many countries to make violence against women illegal, but this is not enough. Implementations of the laws must be made at many levels of society. There is a need to change norms and habits through education including men, women, authorities. In Gothenburg the local government has introduced an overarching program on security, including violence prevention. The aim is to establish cooperation between those NGOs organizations that meet the victims and the municipal institutions. On the basis of accumulated knowledge on activities for violence prevention and rehabilitation of victims the program aims at changing norms at community level, local environment level, relations level and individual level. The program leader shall coordinate cooperation between the city institutions and organizations that are working with persons that have experience of violence or are at greater risk to be exposed to violence more than other people.

## Social Life Enhancement Association (SYGD) in Turkey

### Nargiza Ozguzel

Concrete examples were presented from Turkish experiences, where laws are introduced to protect women, but barely implemented due to norms and attitudes. Initiatives from voluntary organizations provide knowledge through workshops in order to educate men about this issue. Nargiza represents an organization which is providing workshops for migrant women with focus on empowerment where the women are learning about their legal rights, psychological abuse, coping strategies but also which kind of support they can get from the community and state. Authorities in many cases deny helping the women victims due to reluctance to accept the vulnerability of women and girls. Male cultural attitudes of rape is accepted, teen age marriages as a way to solve economic issues in families are widely applied. The media in Turkey counteract opinions that violence against women and children is a huge problem within the society. Rather, victims are often blamed for the kind of violations that they experience. Nargiza emphasizes that a way to succeed is through strengthening the civil society's voices.

## Training for labor market in study circles

ABF, is Sweden's largest adult education association. The abbreviation stands for Arbetarnas Bildningsförbund (the Workers' Educational Association) (<http://www.abf.se/Om-ABF/About-ABF-in-English1/>).

ABF is based on a pedagogical model of learning in study circles, where participants study together and discuss in between them. Two examples were presented

### Sara Claesson

The project presented by Sara concerns development of various programs with the aim to help migrants to integrate in the Swedish society. They provide activities in language training, sewing activities, and study circles, they has opened a language cafe, and involv the community, and supports migrants with job training.

The job training requires cooperation with the Labor Office, that organizes practice and job training. Sara is also working with migrants that are illiterate and helps them to get information about the Swedish community.

## Work training for migrant women with few or no experiences of employment

### Nancy Contreras

An example was presented by Nancy where women were engaged in sewing and learning language at the same time. The teacher (Nancy) speaks Swedish throughout the lessons and the participants are made to learn while learning from those who are faster to grasp the meaning of words and to find information. They help the migrants to adapt to the Swedish way of life and create new routines. To avoid cultural disputes on ways of life the teacher tries to put the focus on human rights perspective.

By making things with their hands the participants get relaxed, which improves the ability to understand language codes at the same time as learning something practical. Sewing activity is a language channel and a way to learn the language but also a way to empowerment and better self-esteem which can also lead to economic sufficiency. It also helps the women to focus on the task and forget about their problems, which can be a way to cope with their everyday problems.

### Summary and reflections

In the workshop, presenters were asked to draw on positive experiences as well as negative factors behind the functioning of their activities for migrant women in their organizations.

Local civic organisations meet people in their daily lives. Experiences from local voluntary organisations show that interactions between the civil society organisations and local authorities are important in order to enlarge the knowledge base of relevance for adaption strategies. It is about intercultural communication about needs and conditions for support. Civil organisations have the advantage to be able to develop informal methods. The workers have the advantage to get a deeper knowledge of individual needs and circumstances and they can mediate between the formal authorities and the individual women. The disadvantage for the civil organisations (voluntary workers) is however the unstable working conditions and the temporal financing of their activities.

The participants in the seminar recognize that institutions should be more prepared and trained on intercultural problems that can occur in contact with foreign born individuals. The Swedish politicians are investing a lot on developing resources for women that have been assaulted and on young parents, but also on opening several family centers. A way forward could be a project named “Build bridges”, that is inspired from projects on genital mutilation. The project has as purpose and goal to facilitate contact and cooperation between people of different ethnic backgrounds.

Experiences lifted in the workshop show that language learning should involve both practical/professional issues and activities to strengthen self-esteem and social mutuality. The necessity of integrating learning skills for a particular job should also take into consideration the need for self-esteem and self confidence in the learning process. Language is about learning cultural codes and meanings, not only learning vocabulary and building of sentences. It is a pedagogical tool also to mix new arrivals and older arrivals who can help to interpret meanings by reference to culture of origins. Intercultural interpretations in various forms are being developed in healthcare, women clinics and hospitals in order to serve both professional staff in healthcare and the clients.

On a social level at large migrant segregation in housing and at works places has a negative impact on learning. All the participants agree that the gender segregation on the workplaces is a big problem. Foreign born women are placed in workplaces where they experience segregation and exclusion, intercultural difficulties and misunderstandings and lack of support from the employer to integrate and do a good job.

Work places that are women dominated are less payed, have a bad and stressful working environment that not always is prioritized for developmental initiatives. For those foreign born that have a higher level of education, the practices are few and that is an obstacle when trying to learn the language. New initiatives in health care have to develop cooperation between complementary education, hospital and practice.

When it comes to migrant single mothers, there is an obvious lack of support and helping actions, especially for the young mothers. This issue is more evident for those who live in vulnerable and segregated areas of the city and have limited language skills.

It was commented by participants that Swedish society in institutions can be quite compact and bureaucratic, which complicates cooperation between states / politics, municipalities / regions and organizations and non-profit associations.

A conclusion from the workshop emphasized that there is a need to give space for social activities that draw on human rights and positive thinking. Organisations in European countries take initiatives to develop capabilities of the persons who come to settle in our countries. To identify shared values would mean to highlight commonalities, to invest in human capital and skills potential.

Another problem to take into consideration, but which was not dealt with in the workshop, is the motivation of the variety of categories immigrants. In response to the political concerns about the number of refugees and asylum seekers, various measures are applied to restrict the numbers.

Consequently we now can discern seven categories of refugees to be hosted in the receiving countries. 1. Those refugees who are waiting for decisions of their asylum application – first and second application. 2. Those who receive temporary permit to stay. 3. Those that are waiting for expulsion 4. Those who cannot be expelled, since the sending countries refuse to take them back 5. Those who remain as illegitimates 6. Those who get permanent resident permit, but are denied family reunification. 7. Those with permanent permit to stay. It is a mixed category of people that are living in the host countries and should be included in measures undertaken by local authorities and civil society organisations. The seven categories have one crucial condition to face – insecurity about their future and their rights during their waiting period, which can be long. It is a situation of limbo, being in between social contexts where they can control their individual living conditions. We know from research that the insecurity and stress related to waiting for a “normal” life can be harmful for health, both physical and psychological.