

Exploring Health, Safety, and Wellbeing: Perceptions and Experiences of Workers of Refugee Background in New Zealand

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Abstract

Introduction: New Zealand is acknowledged as among the most diverse nations in the world, distinguished for its acceptance of individuals from an array of backgrounds as citizens and permanent residents. Refugees have sought safety and security in New Zealand since before World War I, adding to the rich tapestry and culture of the nation. Over time, the nation has proudly endorsed the United Nations Refugee Quota Programme, actively resettling refugees from across the world. Despite this long history of refugee resettlement, there is limited knowledge about the experiences of refugee workers in New Zealand, particularly from an occupational health and safety perspective. **Aim:** This thesis explores the perceptions and experiences of refugee background workers in New Zealand, aiming to present in depth the complex challenges and circumstances they encounter in the workforce. **Method:** The research utilises a qualitative approach, integrating semi-structured interviews and thematic analysis to draw out a pattern in the rich narratives of 13 refugee participants. **Results:** Key themes examined are self-perception, overworking, workplace injury, lack of health and safety at the workplace, discrimination, lack of government support, community support, coping mechanisms and language barrier. **Conclusion:** The findings reveal that while refugee background workers bring valuable skills and experiences to the New Zealand workforce, they often face significant obstacles, such as discrimination, overrepresentation in injury, perceive a lack of support from the Government and overall face difficulty fully integrating into the workforce. Furthermore, the study underscores the critical need for targeted research for the refugee community's occupational health and wellbeing. Additionally, we suggest interventions such as the provision of vocational training and supportive mechanisms to address occupational injury rates of this population.

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Abbreviations and Glossary

Abbreviation	Definition
EU	European Union
IDP	Internationally Displaced People
INZ	Immigration New Zealand
MBIE	Ministry of Business, Innovation and Employment
NGO	Non-Governmental Organisation
OHS	Occupational Health and Safety
OECD	Organization for Economic Co-operation and Development
PTSD	Post-Traumatic Stress Disorder
RFSC	Refugee Family Support Category
RSB	Refugee Status Branch
UN	United Nations
UNCHR	United Nations High Commissioner for Refugees

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Chapter 1 Introduction

In recent years, the occupational health and wellbeing of refugee background workers has stimulated substantial attention in the realm of academic discourse. Refugee background workers are placed in a unique position: they are individuals, who left their motherlands because of drastic hardships such as war, environmental instability, persecution, financial collapse of states and various other causes of concern (Waite et al., 2015). The global academic literature has responded to the 'refugee crises' with an emerging body of international research examining this global phenomenon.

Researchers from nations like Canada, Australia, United States of America, and New Zealand have produced a range of both qualitative and quantitative studies about refugee background workers. Key research findings from these nations highlight common barriers and challenges associated with the refugee working experience. The United Nations High Commissioner for Refugees recognises Canada as being among the foremost nations in the world for the integration of refugee people, ranked number one by the international organisation (UNCHR, 2018). Wilkinson and Garcea (2017), note Canada has resettled more than 10,000 refugees per year through resettlement and asylum channels. The study notes mixed success with the refugee population presenting with economic disparity in comparison to the native Canadian worker counterpart. The study notes difficulties such as lack of recognition in credentials and language barrier make it difficult for full integration into the Canadian workforce. In Australia, research indicates that refugee workers face job insecurity, classified as an underemployed subset of the population, that face systemic barriers such as discrimination and exploitation in certain industries (Cain et al., 2021). The United States presents mixed scenarios where in some states refugee workers benefit from diverse employment opportunities; however, comparatively they continue to face similar barriers across the board with limited language proficiency and cultural adjustment (Kallick et al., 2016). In New Zealand, the growing body of research indicates refugee individuals have

lower household incomes, often working in lower-paid roles, and overall facing challenges navigating the local job market and overcoming workplace discrimination (Deng & Marlowe, 2013).

In the occupational health and safety context New Zealand ranks among the highest for work fatalities in the 'The Organization for Economic Cooperation and Development'. The OECD represents the collective of 37 democracies collaborating to produce policy standards to promote economic growth. Our nation is represented in fatalities indicating a cause of concern in conjunction with already high workplace injury for subsets of the working population (Lilley et al., 2020). The concept of 'workplace injury' has been recognized in various fields including academic, legal, medical, and occupational health and safety. Although there might be slightly varied definitions, there is often a consistently similar interpretation of this concept. In the context of New Zealand, a work-related personal injury is defined in the Health and Safety at Work Act 2015. This act legislates that a work-related injury includes any form of injury in conjunction with employment. Specifically, the act covers injuries sustained at work, during work breaks, or traveling to or from work if transportation is provided by the employer. The act further highlights those injuries are not just of a superficial physical nature but can also be mental injuries, cardiovascular, or cerebrovascular events if resulting from abnormal strenuous harm at work. The act also encompasses that mental harm resulting from a high-stress work environment is considered a work-related injury ("Health and Safety Work Act ", 2015).

Refugee background workers in their new host country may face an array of issues in the workplace with potential vulnerabilities. However, among this expanding field of international research, there is limited research about workers of refugee background in New Zealand. Their experiences often include cultural, linguistic, and socioeconomic barriers that intertwine with the demands of the job, creating a complex and multidimensional field needing in-depth exploration.

1.1 Aim

The aim of the study is to investigate factors associated with perceptions, attitudes and experiences related to health and safety among workers of refugee background. The research seeks to understand the barriers and challenges faced by refugee workers in the realm of the workplace.

1.2 Objectives

1. To understand the experiences of refugee workers transitioning into the workforce in New Zealand.
2. To explore refugee workers' awareness, perceptions and experiences related to health, safety, and wellbeing in their workplaces.
3. To make recommendations to improve health, safety and wellbeing outcomes for workers from refugee background.

Chapter 2 Literature Review

2.1 The Origin of the Term "refugee"

The concept of "refugee" can be found in studies across various fields, including social science, health science, anthropology, and many more fields of research. The term "refugee" itself refers to individuals or groups of people being forced to flee their homeland due to facing tremendous burdens or hardships that compelled them to leave their home nation due to long-term risk (Arar & FitzGerald, 2022; Gibney, 2018; Martin et al., 2014). The term 'refugee' stems from the 17th century, tracing its root to the French word 'réfugié' (Pavezi, 2021). The origin of the French component in the linguistic terminology originates from the historical circumstances of that era. In the 17th century, French Protestants faced tragic circumstances forcing them to flee their homelands. This was due to the dissolution of the Edict of Nantes.

The Edict of Nantes was the monarchical law created by King Henry IV that granted the French population freedom of rights and religion, also applying to minority protestants known as 'Huguenots'. The law was originally enacted in 1598 however by 1685, King Louis XIV dissolved the law entirely. In a climate of religious tension this led to violence and persecution of the Huguenots (Stanwood, 2013). The dissolution of this law created a surge of persecution in which the Huguenots had to escape France to seek a safer environment for their deprived population. Huguenots sought refuge in multiple European nations like England, Netherlands, and Switzerland. These nations offered a safe haven for the Huguenots allowing them to practice their religion and seek economic stability as well as cultural preservation. (Standwood, 2017). The Huguenots' played an important role in their new host nations which allowed them to contribute to the workforce bringing their own set of knowledge, traditions, and cultural customs (Lachenicht, 2017a, 2017b).

Although the term “refugee” was cemented into popular linguistic usage by the Western world it is not a unique phenomenon just to Europe. One of the most significant and famous stories of refugeehood stems from historic literature referenced in holy books such as the Quran and the Bible, both referring to persecuted individuals. Refugees have played a vital aspect to the course of mankind and a famous example is the birth of Islamic theology in the 7th Century. During the 7th century in Arabia during the time of Prophet Muhammad he and his followers were a minority with a newfound monotheistic religion in a society that was widely paganistic. (Al-Azmeh, 2014). The Meccan pagans viewed the newfound Muslims as a threat to their paganistic society, leading to organised campaigns of persecutions towards the Muslim minority. Thus, even subjecting famous early Muslim figures like Bilal ibn Rabah to torture for his conversion to Islam. In response to the constant brutality and persecution the Prophet Muhammad advised his 'Sahaba'(disciples) to seek refugeehood in Aksum Empire (modern-day Ethiopia) under the just reputable Christian King Najashi. King Nejashi famously welcomed the new refugees and allowed them to practise their faith within his jurisdiction of the East African Empire (Saritoprak, 2017). The King recognised the suffering the Muslim refugees faced and under the biblical and Quranic concepts of tolerance both parties lived together in peace and prosperity. This is one of the famous historic events that stands as an example from the Eastern world as a story of refugeehood presenting tolerance and theological understanding (Saritoprak, 2017).

The examples mentioned above, both from Western and Eastern literature, highlight the refugee experience as a human experience that anyone can face. The concept of refugeehood has existed in early history, through various times arising through conflicts in regions such as Europe, Africa, and Asia. Where people were forced to flee their lands, seeking safety and protection elsewhere. This phenomenon persists even in our current political climate in 2023.

2.2 Legislative origin of the term “refugee”

The legal term of "refugee" originates from various forms of legislation that has evolved over time. This includes legislation like international agreements and conventions. The most important example is the United Nations 1951 Refugee Convention which founded the early modern legal definition of who qualifies to be recognised as a refugee (Janmyr, 2019).

However, before this convention's legal definition there were earlier attempts by the League of Nations the predecessor of the United Nations. The League of Nations took concrete steps to address the bloody aftermath of World War I. The First World War which started from 1914-1918 created disastrous consequences for millions of innocent people. Millions of people forced to leave their home nations due to the intense fighting between nations. The vast majority of civilians sought refugehood in neighbouring lands(Kiren, 2021).

The displacement was so severe it brought united international concern. The League of Nations, which was founded in 1920, took the first international response in the refugee crisis and made efforts to resolve the tremendous displacement. Several member nations of the League of Nations worked together to establish the Nansen International Office for Refugees to specifically aid and settle refugee families and individuals into safe lands. The Nansen passport was created named after Fridtjof Nansen, who had taken the lead initiative. Nansen himself was later recognized with a Nobel Peace Prize for his relentless efforts aiding refugees. The Nansen passport served as the first internationally recognised travel document for refugees allowing them to legally travel and obtain rights. The Nansen passport played an essential role in creation of cross-cultural collaboration and the creation of protective rights of stateless refugees (Hieronymi, 2003). The Nansen International Office for Refugees was eventually disbanded in 1938 following the huge violent consequences of World War Two.

Thus, the United Nations was established on the 24th of October 1945 following the end of World War II. The United Nations assumed greater responsibility for the safety and security of refugees and created the United Nations High Commission for Refugees (UNHCR). The UNHCR to this day acts as the body of Governance for research and protection of refugees across the modern world. Following the creation of the UNHCR the 1951 Refugee Convention provided the legal definition of a refugee as “someone who is unable or unwilling to return to their country of origin owing to a well-founded fear of being persecuted for reasons of race, religion, nationality, membership of a particular social group, or political opinion” (UNCHR, 2024b). The 1967 protocol, built upon the legal framework established by the 1951 Convention.

The protocol expanded the initial scope of what a refugee is to include all refugees worldwide. Previously the 1951 Refugee Convention focused primarily on European refugees of war; the new protocol shifted the restrictive definition through which refugees were labelled. The 1967 protocol recognized that refugees could arise from any region, not just Europe. This change of perspective was a massive step forward in the acknowledgement of refugee protection. In this context the UNHCR played a significant role in establishing the moral standards to approach the sensitive issue of protection of refugee rights. The Convention and the protocol serve as the international standard of guiding the work of the UNHCR. Even to this day shaping the approach taken towards refugee background people and the protection and assistance they need.

2.3 Global trends of refugees

Understanding the international global trends of refugees is an imperative task for researchers. Researchers who work across various fields whether governmental or organisational structures all strive to understand why refugees leave their homelands to begin with. Examining the international literature exploring human conflicts and migration

patterns, will aid us in this section of the thesis to understand the compounding burdens that exist for refugees. This will offer insights into the experiences of the refugees in their homelands and their journey towards safety and protection in unfamiliar host countries.

According to the United Nations High Commissioner for Refugees (UNHCR) Global Trends Report of 2022, there was a shocking figure of 108.4 million people worldwide displaced due to severe forms of subjugation (UNCHR, 2022). The subjugation included the likes of persecution, human rights violations, mass economic disparity and other serious factors. The breakdown of this displacement statistics divided in the following way with 62.4 million people allocated as internally displaced, 5.4 million people are classified as asylum seekers and 5.2 million have been assigned as 'people in need of international protection,' and the largest classification being refugees at 35.3 million (UNCHR, 2022). The UNHCR report further states in their report that 70% of the nations that are hosting refugee populations are regarded as low-middle income countries. The countries that host the most refugees are Turkiye with 3.6million refugees, followed by the Islamic Republic of Iran at 3.4 million refugees, Colombia at 2.5million refugees and the only high performing economic nation Germany at 2.1 million refugees, lastly Pakistan with 1.7 million refugees(UNCHR, 2022).

The office of the UNHCR further elaborates that 70% of the world's refugee population find refuge in neighbouring countries near conflict zones (UNCHR, 2022). These nations are vital lifelines for the preservation of human life, displaced people find better circumstances in their neighbouring regions (Hovil, 2016). The UNCHR global trends report, recognises the amount of pressure that is put on the nations above mentioned. The mass influx of refugees often come with numerous challenges to the respective governments providing refuge. For example, Turkiye stands out as the top host sheltering 3.6millions refugees within their jurisdiction. Turkiye has faced tremendous economic challenges in recent times with growing inflation making it difficult for refugees to have full economic integration into the Turkish workforce (Demirkol, 2024). In comparison. Germany, a high-income nation, provides a stark

contrast as the leading European host. Germany accommodates 2.1 million refugees into their nation, the majority coming from the Syrian civil war.

Germany on the other hand has been able to successfully show markers of integration for their refugee population providing essential needs such as healthcare and accommodation (Mahadevan, 2024). An important finding highlighted in the Global trends report presented, children constitute a whopping 40% of all forcibly displaced individuals, by far rendering them the most vulnerable sub-demographic within this population (UNCHR, 2022). This urgently brings calls for the need to address the challenges associated to displaced children including protection, healthcare, education, and counselling. Refugee children by far face the most tragic outcomes often having parental figures pass away in certain circumstances (Silove et al., 2017). Lastly, the UNHCR Global Trends report presents another staggering revelation that most of the world's refugees originate just from three specific countries: Syria, Afghanistan, and Ukraine. These conflict riddled nations have endured displacement at an unprecedented level leading to net negative population trends (Gál, 2019; UNCHR, 2022). As a result of these conflicts the number of civilians of these countries have left seeking safety and peace in other regions.

The War in Ukraine has resulted in the substantial displacement of approximately 6.2 million refugees seeking shelter within the European continent. A staggering 94% of all Ukrainian refugees have been settled in Europe (UNCHR, 2024a). This is a similar trend to the resettlement of refugees in the Middle East also moving in majority to their neighbouring regions. The war still continues to leave debilitating consequences for the Ukrainian and Russian people. Ukraine has lost millions of their population producing a net-negative population similar to the likes of Syria and Afghanistan (Lim et al., 2022).

2.4 Historical background of refugees in New Zealand

New Zealand's commitment to providing safety and shelter to refugees in vulnerable situations globally stems from the historically significant step they undertook as being among the one of the few countries in the world to sign the 1951 Convention Relating to the Status of Refugees and its 1967 Protocol, the 1984 Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment and the 1966 International Covenant on Civil and Political Rights (Immigration New Zealand, 2024). New Zealand at a global stage has taken the role of sheltering nations since before World Wars. Dating as early as the 1800s the nation has accepted Danes seeking to escape German occupation, Jews fleeing from Tsarist Russia and French Huguenots escaping religious oppression (Cozens, 2005). New Zealand is widely considered one of the most welcoming nations that provided protection and a permanent home to refugees and orphaned children since the first World War (Pepworth & Nash, 2009). The country's diversified fabric was further enhanced by the influx of displaced individuals from other nations throughout the post-war years.

2.5 Demographics of refugees in New Zealand

Over time, humanitarian catastrophes in various regions of the world have played a role in the changing shape in New Zealand's refugee demographic. The 1970s conflict in the Middle East provided New Zealand with the opportunity to play a role in providing refuge to individuals fleeing persecution. Particularly, the Baha'i refugees from Iran who were welcomed by New Zealand and provided with safety and protection from religious persecution from various governments based in the Middle East. The 1990s also welcomed another demographic in New Zealand, refugees from East Africa.

The nation provided a safe space for refugees displaced by the Ethiopian-Eritrean war in the early 1990s, offering them a chance to rebuild their lives and safety they were unable to find in their home nations. Not long after, New Zealand also welcomed the Somali people who

were fleeing the civil war in the late 1990s, further demonstrating its dedication to aiding those affected by conflict and humanitarian crises. Mortensen et al. (2012) estimates since World War II, over 50,000 refugees from 55 countries have been resettled in New Zealand. Within the last two decades, the foremost countries of origin for these refugees originate from the following nations Afghanistan, Iraq, Somalia, Ethiopia, and Burma. Auckland initially served as the fundamental choice for receiving refugees, however there are five other main resettlement centres built across the country: Nelson, Wellington, Hamilton, Wellington, and Christchurch. These centres play crucial roles in aiding the successful integration of refugees into their new communities and offering them the necessary support to rebuild their lives in a safe and welcoming environment (Pahud, 2008; Sampson et al., 2016).

As of recent times in the 2020s, the nation has remained unwavering in its commitment to humanitarian principles and opened their borders to people in peril from Ukraine, Syria and Afghanistan. Specifically with the recent situation in Ukraine the New Zealand Government created a special class visa for Ukrainian refugees termed as the “2022 Special Ukraine Visa” this temporary visa allows New Zealanders of Ukrainian heritage to apply to bring their family on a 2-year temporary basis. This is the first instance of the Government creating a specific visa for a particular group of refugees (Ministry of Immigration 2024). Similarly, to the Ukrainian response the Government has prioritised Afghan refugees and set aside a specific number for them to be resettled in 2023/2024 at high priority at 200 places. Syrians are also given this benefit as 200 places are set aside for their safety and wellbeing with a particular focus on the Kurdish minority of Syria (*Immigration New Zealand 2023a*).

2.6 New Zealand's refugee resettlement process

Immigration New Zealand, which operates within the Ministry of Business, Innovation, and Employment (MBIE) is responsible for the operation and oversight of the program (*Immigration New Zealand 2023a*). The resettlement process consists of an annual quota

system. This system is responsible for determining the number of refugees accepted into New Zealand. The annual quota system also undergoes regular reviews every three years in order to ensure it aligns with the need for global resettlement (*Immigration New Zealand 2023a*).

The composition of the quota system is cooperatively determined by the Ministers of Immigration and the Minister of Foreign Affairs. The official establishment of program's took place in 1987, the first cohort accepted consisted of 800 refugees, in 1997 the quota was later adjusted to consist of 750 places. The increased growing humanitarian needs, and global refugee trends provided a basis for the increase in the program's quota. The quota was increased to 1,000 places in 2018. Subsequently, with strong support and advocacy, the quota was further raised to 1,500 places per year (*Immigration New Zealand 2023b*; Marlowe et al., 2014).

Further to the annual established quota, the New Zealand Refugee Resettlement process offers two additional pathways for refugees seeking entry into the country. The asylum seeker pathway pertains to individuals who have arrived in New Zealand seeking protection without going through the United Nations-approved refugee quota settlement process. These individuals seek refugeehood status and submit their claims to Immigration New Zealand. For this purpose, Immigration New Zealand has a dedicated branch known as the Refugee Status Branch (INZ RSB) staffed with specialists responsible for reviewing asylum seeker cases and making decisions (Diver, 2017). After assessing the claims, the INZ RSB provides a decision to the asylum seekers. In case the individuals feel that the decision is unjust, they reserve the right to appeal to the Immigration Protection Tribunal, which conducts a thorough review of the case and issues the final decision (Immigration New Zealand, 2024).

In 2013, the New Zealand government enacted changes to the Immigration Act to curb any attempts of large groups of people claiming to be asylum seekers. Specific rules were

introduced to dissuade “mass arrivals”, referring to groups of 30 or more individuals claiming asylum all at once. The Immigration Amendment Act 2013 allows the detention of asylum seekers in large groups for up to six months, including men, women, and children (Bogen & Marlowe, 2017). During the period of awaiting refugee status determination, asylum seekers receive restricted support and rights under the UNHCR Convention, which has brought attention to the challenges they face and the disparities they encounter compared to quota refugees. Academic as well as media discourse has arisen in New Zealand following further recommendations by the Immigration Minister Michael Woods to pass a bill allowing the detention of individual asylum seekers to be detained for 28 days compared to the previous 4 days. The bill further plans to introduce a “community management approach” which includes electronic monitoring technology being utilised for asylum seekers (Hollywood, 2022). Recent media discourse brings attention to the challenges encountered by asylum seekers during the period of waiting for their refugee status. The author reports on the economic and social inequalities experienced by convention refugees in contrast to the support provided to quota refugees (Neilson, 2023).

The final alternative for refugees to obtain entry into New Zealand is via the family reunification process through Immigration New Zealand’s Refugee Family Support Category (RFSC). The RFSC represents a policy initiative with the main goal of providing support for refugees who are already living in New Zealand. Within the framework of this category, refugees who have been granted permanent residence can provide sponsorship for their family members and in this role provide support for them in their relocation to New Zealand. The RFSC consists of a two-tier system, and to qualify for the role of sponsor, refugees must fit a criterion. Specifically, being 18 years of age or older and meeting the requirements of the program by either being tier one or tier two.

The RFSC is closely linked with the United Nations High Commissioner for Refugees (UNHCR) annual quota process (DeSouza, 2011). The category was established with the

intended outcome of helping refugees further integrate into their host nation by enabling family reunification, granting refugees the opportunity to reside with their family members, thus mitigating the challenges of family separation often caused by conflict during their journey to find safety and protection(Rasheed, 2023).When an individual is successfully given the status of a refugee through the quota system approved by Immigration New Zealand the next step is being orientated at The Mangere Refugee Centre.

The Mangere Refugee Centre was created for the purpose of orienting refugees into New Zealand society, in a six weeklong program. Refugees are given an introduction into their new society and through this program they receive education, English language tuition and medical assessments for their physical and mental health needs(Beehive New Zealand Government 2018). The program provides refugees with the fundamental knowledge to navigate their first steps into their new home nation. During this settlement period the Government provides housing for refugees upon completion of this orientation and may be relocated in the following areas such as the Auckland region, Waikato, Manawatu, the Wellington region, Nelson, Christchurch, Dunedin, and Invercargill and newly added Blenheim and Timaru(Kale et al., 2020; McBrien, 2014).

2.7 Global research on the health of refugees

Global refugee health is an imperative and complex field of study that investigates the health and well-being of refugees and displaced populations worldwide. This area of study focuses on people being forced to flee their homes due to conflict, violence, persecution, among other factors, understanding and addressing the health needs of this vulnerable population is essential. The health challenges faced by refugees are varied, encompassing essential aspects like mental health, physical health, and occupational well-being, making this field of academic research a diverse field of study. To narrow the focus for this literature review, we will specifically examine the mental health of refugees, their physical health, and their

occupational well-being, by reviewing international research and domestic research to give us a wider understanding of the health needs of refugees.

2.7.1 Refugee mental health

Epidemiological research on mental health among refugees has experienced significant progress since the 1970s. Prior to this period, existing literature faced challenges due to a lack of robust research, scientific documentation, and comprehensive data on the prevalence and determinants of mental health among refugees (Silove et al., 2017).

In the context of individuals with a refugee background who have endured violence and trauma, particularly in environments characterised by repetitive and severe forms of violence, the risk of developing mental illness is significantly heightened (Bogic et al., 2015; Priebe et al., 2016). Community studies have provided evidence indicating that individuals who have endured violent war-like environments tend to exhibit higher rates of post-traumatic stress disorder (PTSD), depression, and other anxiety disorders compared to those typically found in non-war-affected populations (Fazel et al., 2005; Tempany, 2009). Several longitudinal studies conducted among recently resettled refugees have demonstrated that post-traumatic stress reactions may persist even after refugees settle into new nations (Lie, 2002; Mollica et al., 2001; Roth et al., 2006). This increased vulnerability has been linked to both pre-migration experiences, particularly exposure to war trauma, and post-migration stressors that refugees often face in new lands, including separation from family, challenges with the resettlement process, unemployment, inadequate housing, and issues related to acculturation (Alfadhli & Drury, 2016).

However, it is worth noting that the prevalence of mental disorders among refugees can vary significantly from one study to another. Higher-quality studies, characterised by their rigorous methodologies, often find that rates of PTSD and depression among refugees are at or

below 15% (Hynie, 2018). Consequently, research suggests that although rates of mental disorders are indeed higher among refugees and asylum seekers compared to the general population, the majority of them are not suffering from mental disorders, and most tend to recover from the distress stemming from their migratory experiences within one year of resettlement (Hynie, 2018).

In the context of New Zealand, refugee mental health studies are an emerging field. Compared to Western counterparts like Australia, Canada, and the UK, there have been more studies conducted with a variety of different ethnicities to gain a broader understanding. However, in New Zealand, refugees still account for a small minority, representing less than 1% of the overall population (Shrestha-Ranjit et al., 2017). The Qualitative study conducted by Shrestha-Ranjit et al. (2017) sought to examine the effectiveness of primary health care services in addressing the mental health needs of minority refugee populations in New Zealand. Published in the field of Mental Health Nursing, the study focuses on Bhutanese women from refugee backgrounds in the Palmerston North region and their overall mental health since resettling. Most of the women from that study reported that their mental health status had deteriorated due to compounding stressors related to their traumatic refugee journey, as well as the resettlement challenges they had been enduring. Shrestha-Ranjit et al. (2017), further states that the women reported an improvement of their physical health however some participants reported mental stress to various factors including language difficulties, family separation, financial constraints, and lack of spiritual and social support networks.

Choumanivong et al. (2014) conducted a similar study in New Zealand. The study objective was to understand the refugee family reunification's impact on the mental health of individuals during the resettlement into their host country. This study focuses on how family reunification, or lack thereof, impacts the resettlement journey and the mental well-being of refugees whose new home is now New Zealand. In particular, the study looks at the lived

experiences of refugees from various ethnic origins in the process of family reunification in an effort to better understand what "family" means to them. A total of 61 refugees from various origins from Africa, the Middle East, and South Asia participated in semi-structured interviews as part of Choumanivong et al. (2014) qualitative exploratory method. According to the study's findings, the biggest obstacle to successful integration was the lack of family in 39 out of 46 focus groups and in 13 out of 15 interview subjects. Participants felt their mental health was affected due to stress and anxiety stemming from the wellbeing of their family members living abroad in dangerous conditions. Participants reported feeling unsettled and guilty having their family left behind. This study was significant in demonstrating the significance of the resettlement process to refugees' general well-being and happiness.

This study is a crucial reminder of the adverse effects that resettlement has on refugees' mental health. The perspective discussed is tied to another study on resettled refugee families that was undertaken in New Zealand by the Refugee Family Reunification Trust and Changemakers Refugee Forum. A key observation from the research demonstrated that 93% of refugees who were resettled needed mental health assistance from Wellington Refugees as Survivors Trust, and that their symptoms significantly decreased after they were reunited with their family (Choumanivong et al. (2014).

Both pre-migration and post-migration were significant influencing factors in refugee mental health. Aotearoa would evidently benefit from further comprehensive studies focusing on these aspects to showcase the challenges faced by refugees and their overall well-being. Furthermore, there is a pressing need for further exploration and research into the mental health of refugees in New Zealand as they are a growing demographic in the country and further studies would benefit how they are able to successfully integrate in the country.

2.7.2 Refugee occupational health

Refugees face an array of challenges when seeking refuge and stability in a new land. The narratives of refugeehood are often associated with displacement, uncertainty, and suffering. Refugees find themselves on a journey filled with hazards and barriers that affect their ability to make their livelihoods but also impact their overall well-being. While there has been extensive research on the physical wellbeing of refugees and their mental health, the occupational health of this subset of the population is equally imperative for successful societal integration in their new host nation. This section focuses on the academic context of refugee occupational health, demonstrating the complex factors of their work experiences and difficult situations they may encounter. We seek to analyse various papers focusing on factors such as high rates of injury, workplace discrimination, long working hours, and other critical components, we aim to observe the challenges that refugees encounter in the world of work and their broader implications.

2.7.3 Refugee labour market

The labour market experience of refugees globally varies from one nation to another. When we examine global research on the occupational health of refugee background workers many noteworthy outcomes are presented. Various studies find refugee workers often face long working hours and challenging working conditions as they seek to rebuild their lives in unfamiliar environments. This phenomenon is not limited to a single region; it is a global challenge that transcends borders and cultures (Lee et al., 2020). Employment is a paramount concern for refugees, serving as a crucial means of attaining financial stability. Often, refugees arrive in new countries with minimal financial resources, a consequence of the dire circumstances that compelled them to leave their home societies. They grapple with the aftermath of economic systems that have crumbled, accompanied by rapidly depreciating currencies. This predicament is vividly illustrated in countries such as Syria, Iraq, and Somalia, among others.

The migration of refugees into further away lands from their home nations, for example the 2015-2016 migration into Europe has created an emerging field of study for many researchers in Europe and overall West. The influx of refugee immigrants from 2015-2016 emphasised a new focus on this population often charged with political and social challenges from different ideological sides of a society (Zimmerman & Beam, 2020). A significant issue for refugee people who have immigrated into the West is finding employment. Refugees face lower rates of employment compared to their native counterparts (Arendt, 2022; Azlor et al., 2020; Bevelander, 2020; Brell et al., 2020; Fasani et al., 2022; Wirth et al., 2019).

The lack of labour market integration presents a significant and daunting challenge for refugees, who often struggle to secure employment opportunities. Even when refugees do manage to find work, their employment is frequently characterised by low skill requirements and low wages. This issue is compounded by the portrayal of refugee and migrant workers in existing literature, which frequently depicts them as having limited agency in choosing their occupations. Kazi et al. (2019) highlights this concern by noting that many workers are compelled to accept what they term as 'survival jobs,' often without receiving adequate training. These individuals may also face language barriers, hindering their ability to communicate effectively in English, and possess limited knowledge about their rights as workers.

2.7.4 Refugee exploitation

Exploitation refers to the misuse of power and authority, particularly towards individuals who find themselves in a position of vulnerability. Within occupational health and safety academic discourse "exploitation" is attributed to the concept of "forced labour". Forced Labour is defined by the International Labour Organization as "all work or service which is exacted from any person under the menace of any penalty and for which the said person has not offered himself voluntarily" (Moreau, 2018). In this context, exploitation extends beyond just

economic subjugation; it refers to individuals who are coerced into labour against their will essentially being enslaved by those in position of authority. We will explore the academic research around “forced labour” to understand the current exploitation faced by refugee workers at home and abroad.

The International Labour Organization (ILO) estimates that over a ten-year period, 40 million people are estimated to have faced labour or sexual exploitation. The stunning figures are of grave concern for international bodies such as the European Union, African Union and the wider United Nations (International Labour Organisation, 2017). Refugees often face the brunt of forced labour being in vulnerable positions at times not having the correct legal documentation to reside or work in the country they’ve fled to. Thus, undocumented refugees are often entrapped in modern forms of slavery of several types that include involuntary servitude, forced prostitution, and debt bondage (Weiss, 2015). Exploitation of refugee individuals is a consistent issue across the world with victims spanning from a diverse background from Africa, Europe, and Asia. Recent conflicts in South Asia, Middle East and Eastern Europe have created an atmosphere ripe with injustice. Conflicts such as the war in Ukraine, Rohingya persecution and Syria war has led to thousands of refugees kidnapped and forced into labour without pay (Hanlon, 2018; Hoff & de Volder, 2022; Seltzer, 2013).

The Rohingya constitute the world’s largest stateless ethnicity without legal citizenship since 1982 making the largest stateless population (UNCHR, 2023). The Rohingya population fled to neighbouring regions, with Bangladesh hosting the largest population with over 900,000 individuals (UNCHR, 2023). A majority of which have no legal documentation or the right to work within existing legislation. This situation has led to continuous forced labour within Myanmar and Bangladesh. In Myanmar the Rohingya population are forced to be under the scrutiny of the Military Governance forced to work in hard labour without payment or compensation (ILO, 2018 (International Labour Organization, 2023). Riley et al. (2020)

examined the systematic human right violations of Rohingya refugees in Bangladesh through interviews of 495 individuals detailing horrific circumstances of which 56% faced torture and 49% faced forced labour. More than half of the participants 61%, reported mental health symptom levels indicative of PTSD and 84% endorsed emotional distress (anxiety, depression).

This situation of refugee exploitation is not just common in South Asia this issue is also present in the Middle East and Africa at a prevalent level. Druze is classified by the Turkish government as a satellite city essentially referring to a designated province for those seeking International Protection (IP). This refers to refugees seeking asylum, this is worth noting as the study indicated there are 7,000 registered "forced migrants" from an array of backgrounds Syrian, Afghani, Iraqi. The IP classification doesn't allow these individuals to legally work so thus they are forced into unregistered employment and used as a source of cheap labour often affecting refugee men in Turkiye (Kizilelmas, 2023).

Worth noting the exploitation of refugee individuals is not limited to the Eastern World but is also a growing trend in the Western World. With nations such as the United Kingdom, Australia, and the United States of America publishing research to show that this is not just a trivial pattern but a growing grave concern internationally. The United Kingdom in 2015 passed a prominent piece of legislation known as the 'Modern day slavery Act, a very tough response to the uprising in cases regarding forced labour throughout the country (Hodkinson et al., 2021). The act was passed not only to combat forced labour but also any instance of human trafficking. The bill further established harsher penalties for criminals engaging in recruitment of victims, protection of identified victims and an independent Anti-Slavery Commissioner tasked with exposing injustices. The bill also created a platform for reporting said violations to the authorities (Broad & Turnbull, 2019).

This bill resulted from various data provided to the government to address this on a national level. Pattenden (2011) reported forced labour is concentrated in labour intensive industries such as domestic work, agriculture, and construction positions throughout the UK. The research of forced labour in the UK food industry conducted by Scott et al. (2012), looked at 62 exploited migrants across five sites. The study indicated the interviewed refugees and migrants faced flagrant violations such as over working, physical abuse, insults and the restriction of bathroom usage. The issue of forced labour and exploitation of refugees is also prevalent in the United States. The US is seen as a land of opportunity by many people often facing hardships. In the case of the US nearby conflicts North America and South America has given rise to a magnitude of civilians seeking to escape persecution and violence in from their home nations often entering the US without valid legal documentation(Farrell et al., 2020).

The problem of labour exploitation for refugees is not too far from home with Australia facing similar issues. The issue hit national attention in Australia with temporary migrants who self-identified as refugees, but under Australian legislation held in the controversial Christmas Island. In 2012 Sri Lankan refugees who sought to flee persecution were prolonged in detention but granted a temporary visa to allow them to work(Berg et al., 2022). Three major recycling companies in Victoria regularly subjected individuals to work 12hr shifts without adequate ventilation surrounded by hazardous air quality. Further to these 30 workers were grossly underpaid. The Australian Workers Union assisted the workers file complaints, and a federal court trialled the companies responsible for a breach in Fair Work Act 2009.

This situation isn't uncommon in Australia often subjected to international criticism for their martial punitive policy towards refugees unclassified as such and held in detention in offshore Christmas Island. Asylum seekers often hold a range of temporary visas in the Australian legal system offering little protection and legal justice (Berg et al., 2022). New Zealand in comparison offers little insight to the lives of refugee workers. A limited paper

covering forced labour leading to a dearth in research we hope to be addressed in future studies. Having this paper be a contributing element for further research for the refugee background population in Aotearoa.

2.7.5 Discrimination

The concept of 'discrimination' has been extensively studied across various fields, including social science, health science, human resources, and law. According to Krieger (2013), discrimination is a socially structured phenomenon justified by ideology and manifested in interactions among individuals and institutions. It asserts that certain individuals are given privileges over others based on their attributes. In the context of Occupational Health and Safety often 'workplace discrimination' is the relevant area of study. Workplace discrimination refers to actions of institutions or individuals setting unjust terms and conditions to hinder workers. This is usually motivated by beliefs of inferiority towards a certain demographic by others who preserve their group as being more dominant or capable (Okechukwu et al., 2014). At the institutional level discrimination involves policies or processes that produce harm or maintain inequality across groups. This can be in relation to a company setting unfair policies towards a certain group or be even wider having discriminative Governmental policies to subjugate a vulnerable demographic.

In the context of refugee discrimination in the occupational field, several studies touch on the challenges faced by refugees in various aspects of their lives, including employment, mental health, and societal integration. The study by Taghavi et al. (2024) explores the 'Socio-Professional Trajectories of Refugees in France.' This study focuses on the identity of refugees in the French workforce against the backdrop of the French financial crisis, which has led to a hostile perception of refugees as 'undesirable asylum seekers' (Julien-Laferrrière 2016). This change in host societies' perceptions can lead to feelings of discrimination. The French qualitative study highlighted stigmatisation and discrimination, particularly in the

professional sphere. Refugees in the study largely responded to identity issues associated with unequal treatment and subjugation. It is worth mentioning that the perception of discrimination varies among different groups of refugees. The study emphasised discrimination as a significant obstacle to forming a coherent self-concept, prompting the need for cultural and professional identity work. Three main trajectories are identified: Adjusting, Enhancing, and Detaching.

Sangalang et al. (2022) focused on refugee South Asian women resettled in the USA. The study underscored the role of discrimination as a key determinant of health among refugees. Discrimination was found to have a greater impact on post-traumatic stress disorder (PTSD) and depressive symptoms compared to trauma exposure itself. This study challenged the notion that trauma alone predicts refugee health outcomes, emphasising the importance of addressing post-resettlement stressors, including discrimination and community violence, for effective intervention strategies. Senthanaar et al. (2023) explored employment-related challenges faced by refugees, highlighted in studies across Canada.

These challenges include the discounting of foreign credentials, language proficiency barriers, lack of work experience in the host country, and discrimination. Despite their education and skill levels, refugees often find themselves in lower-skilled and precarious jobs with limited benefits and low wages. This underutilization of skills not only affects refugees' economic well-being but also has broader implications for the Canadian economy, with estimates suggesting significant costs in terms of GDP. Overall, these studies showcase the nature of refugee discrimination, impacting various components of their lives from employment opportunities to mental health and societal integration. Addressing these challenges requires comprehensive approaches that tackle systemic barriers and promote inclusivity and equality.

2.7.6 Perception, language and communication

Language is an essential part of life, especially in the workforce. The refugee background population faces unique circumstances in the labour force. Individuals hailing from the refugee background are characterised by their difficult decision of forced migration, leaving their entire lives as they know it, seeking safety in a new land. Refugees then enter an entirely new workforce in their host nations, often in a different language, with new legislation, and credential differences. Refugees who seek shelter in the West, for example, in New Zealand, often do not have their credentials recognised, thus leading them to work in fields new to them. Throughout this section of the thesis, we will review current global and domestic literature focusing on how refugees are perceived, and the barriers associated with language and communication.

Perceptions of refugees in the workforce vary from positive associations to negative stereotypes and prejudices. In a study conducted by Griffiths (2015) refugee men are often negatively looked upon for not being strong enough to handle their struggles, often not classified as victims like women and children are. This is the case in nations like Turkiye, with documented examples of refugee men being targeted and insulted for not fighting in the deadly civil wars (Kizilelmas, 2023). The negative perception is often tied to hyper-masculine societies with strong cultural patriarchs where men are supposed to be viewed as strong (Tekkas Kerman & Betrus, 2019). The study by Ozduzen et al. (2021) also evaluates a key point on how social media and the overall media play a strong component in the perception of refugees. The study by Ozduzen produced an examination of media posts, often finding numerous racist unregulated spaces for the dissemination of racist texts encouraging hostility and degradation of the refugee identity in Turkiye. This phenomenon is not just a problem faced in the Eastern World; the same rhetoric can be found across the West. Research shows that the Western nations have seen an increase in hate towards refugees and migrants (Achieme, 2013; Engel et al., 2018; Zick et al., 2008).

Refugees are often presented similarly as people taking advantage of the system and eating up the resources of the general public(Szaflarski & Bauldry, 2019). The refugee identity is then stigmatised, making it hard to find employment and face racism in the labour force, a common theme throughout many parts of the world leading to psychosocial pressure. This leads to the economic anxieties for refugee workers often feeling as if they are the scapegoat for problems that may arise in the workplace(Szaflarski & Bauldry, 2019). Furthermore, studies indicate the impact of racist negative perceptions towards refugees only exacerbates economic hardships as employers. Employers are reluctant to hire refugees facing backlash from customers and clients in hostile social environments.

In the context of New Zealand, the refugee population is overrepresented in unemployment (O'Donovan & Sheikh, 2014). The Ministry of Business, Innovation and Employment reported in 2013 that, out of the resident visa categories, the portion of wage and salary earners, the quota refugee visa holders present with the lowest in wages and salary(Ministry of Business Innovation and Employment, 2021). This is often associated with various barriers such as language barrier, limited New Zealand work experience, lack/limited recognition of overseas qualifications, and lack of understanding the workplace culture and systems (O'Donovan & Sheikh, 2014).The language barrier is a significant issue for the refugee community in New Zealand (O'Rourke, 2011). Often, refugees who are victims of forced migration find themselves in a totally different environment with limited educational recognition compared to those who carry degrees from foreign universities. This often results in the refugee population working in “low-skilled” positions paying very little. The Ministry of Business, Innovation and Employment report 2021, in figures that demonstrate this phenomenon. Refugees often find themselves stuck and feeling guilt for their inability to adapt to the New Zealand workforce.

This hinders one's self-esteem and confidence, often employment being the marker of success for many new settlers. The added pressure refugees face from familial remittance to send money back home to their friends and family in dire situations (Martone et al., 2011). The hesitation of seeking help is often a barrier with language being a hindering component. Many newly settled refugees are faced with loneliness and depression (Abood et al., 2021). Findings from research reflect this, as the refugees interviewed reported their main area of dissatisfaction being employment (Walther et al., 2021). However, worth noting is that the salary and wages of refugees often increase over time, consequentially being linked to the progression of English proficiency (Ministry of Business, Innovation and Employment, 2013). There is also stark criticism from researchers and refugees from various backgrounds on the failure and adaptability of the New Zealand system.

Many refugees are over skilled and working remedial jobs not having clear pathways to naturalize their knowledge into the New Zealand labour force. This in turn creates long-lasting dissatisfaction for refugees who are not in the position to re-study their qualifications starting essentially from scratch. This issue was addressed in the study of O'Rourke, 2011, evaluating the resettlement program and arguing for new resettlement strategies for a more culturally cohesive and holistic approach to refugee students and individuals. The current refugee statistics still present poor outcomes with refugee background workers still overrepresented in Government assistance and underrepresented in employment overall. Though there are minor positive changes, the suitability to overcome barriers such as language and communication has room for improvement for this population.

2.7.7 High-risk industry and precarious work

Refugee workers are often represented in employment that is precarious and high risk. Due to many nations in the West not accepting of previous qualifications refugees take any jobs that can provide with income. This depiction is supported by the findings of Yanar, Kosny,

and Smith (2019), who assert that refugee and migrant workers often find themselves in physically demanding and hazardous jobs that offer lower pay and longer working hours (Kazi et al., 2019; Kosny et al., 2020; Yanar et al., 2022). Many of the industries that rely on refugee labour, as observed by Ronda Perez et al. (2012) expose workers to harsh conditions, including extreme temperatures, loud noise, vibrations, and fast-paced work environments. Concerning ramifications arise for the occupational health and safety of workers who are of migrant or refugee background.

Scholars in occupational health and safety field point out that the vulnerable immigration status of migrants and refugee workers further intensifies the significant risks posed to migrant and refugee workers in high-risk jobs. This vulnerability is further amplified by the host country's regulations, which often link the refugees' right to reside in the nation to their employment status. In some instances, this puts immense pressure on refugees to accept exploitative working conditions to maintain their legal status within the host country. Türkiye and Lebanon, for example, have witnessed political discourse advocating for mass deportations of refugees, illustrating the dire consequences faced by refugees when their employment and residency rights are intertwined (Terzioglu, 2023; Terzioğlu, 2016).

Internationally, including USA, UK, Australia and Canada, there is a growing body of evidence showing demonstrating refugee background workers are far more likely to get injured compared to their native counterparts (Habib, 2019; Kazi et al., 2019; Kosny et al., 2020). Refugees and migrant workers often find themselves in physically demanding occupations, which, in addition to language barriers, expose them to a higher risk of occupational injuries (Szulc & Szymaniak, 2023). This pattern is observed not only in Western nations like North America and Australia but also across Europe and Asia (Kazi et al., 2019; Priebe et al., 2016; Reid et al., 2014; Salminen, 2011). The extensive international research, as demonstrated in Salminen's comprehensive literature review in 2011, reveals that immigrant workers are 2.1 times more likely to experience workplace injuries compared

to their native counterparts. One contributing factor to this elevated risk is the language barrier, as immigrants often struggle to comprehend safety training materials, leading to potential workplace accidents. Furthermore, the perception that their well-being is of lesser importance to employers than overall production goals exacerbates this situation, Salminen's study and Kazi et al. (2019). findings underscore the heightened vulnerability of immigrant and refugee workers to workplace injuries, emphasising the urgent need for improved safety measures, comprehensive training programs, and support systems that consider the unique challenges faced by this population. Addressing these issues is crucial not only for the well-being of these workers but also for the overall safety and productivity of the workforce in host countries.

2.8 Summary of literature review

This chapter explored the occupational health and wellbeing of refugee background workers emphasising the international and domestic experiences of refugees in academia. Refugee workers face a paramount challenge attempting to integrate into new lands safely and work as productive members of society. Global academic literature extensively covers the modern day 'refugee crisis' particularly in nations like Canada, Australia, England producing an array of studies however worth noting in our literature review despite New Zealand being among the most diverse nations in the developed there has been limited research in this area. This chapter sought to bridge this gap examining diverse literature, focusing on several aspects like the origins of refugeehood, legal classification, global trends of forced migration and the overall health and wellbeing of this population. The examination of global trends in the refugee crisis revealed an immense scale of displacement with millions of refugees seeking shelter disproportionately in five nations such as Turkiye, Iran, Colombia, Germany, and Pakistan. These nations face considerable challenges integrating such large refugee populations highlighting the need for international cooperation and support. New Zealand's historical commitment to refugee resettlement as a signatory to the 1951 Refugee

Convention and its 1967 Protocol demonstrates the country's dedication to protecting the rights of refugees. This study will examine in depth the refugee working experience, their attitudes, and perceptions to understand the current climate for this subset of the population.

Chapter 3 Methodology

In this chapter, we expound upon the methodology utilised to explore the perceptions, attitudes, and experiences concerning health, safety, and wellbeing among workers of refugee background in New Zealand. We will elaborate several relevant aspects such as the study design, participants, data collection methods, and the form of analysis applied. Furthermore, there will be further explanation on the positionality of the researcher, ethical considerations of the study. This study strives to serve as a means to provide an insight to the understudied refugee population in the scope of occupational health and safety.

3.1 Study design

A qualitative research method was selected as the methodology selected for examining the experiences of participants. Qualitative methods facilitate research literature from many disciplines by describing, interpreting, and generating themes or theories about the social interactions that occur typically in natural environments, rather than experimental situations (Hamilton & Finley, 2019). The purpose of qualitative research is to understand the perspective of individuals or groups and the context in which these perspectives arise. The strength of this methodology lies in its flexible nature allowing the ability to clarify human behaviours that are often difficult to quantify. The chosen methodology is not bound by a set of guidelines that structure the research process in numerical format. The author Maxwell (2019) notes qualitative research works with the universe of meaning, motives, beliefs and attitudes which contribute to processes and phenomena that is not reduced to operational variables. The innate nature of qualitative methodology has given this study a rigorous basis to explore and understand the unquantifiable meaning and experience of refugee workers in New Zealand.

3.2 Participants

The participants of the study were all individuals who moved to New Zealand as refugees.

The requirements for eligibility were as follows:

- participants must be of refugee background,
- have worked in New Zealand for over one year,
- and be over 18 years of age.

Participants selection involved collaboration with New Zealand Ethnic Women's Trust (NZEWT). NZEWT serves as a leading charity that advocates and supports for refugee families and individuals in New Zealand. The organisation was contacted to aid in the recruitment of eligible individuals and agreed to assist. Purposive sampling technique was used to select participants for this study. NZEWT used their extensive and known refugee clientele to promote this study through advertising it in their community programs. Several community programs were attended to speak to families and individuals. After my introduction and in person discussion with refugee community members, this resulted in the recruiting 13 participants between the ages of 22-50.

The purposive sampling technique was the appropriate sampling rationale. This form of sampling allowed for targeted recruitment, allowing the researcher to meet prospective participants face to face to ask relevant questions to decide if they were eligible (Rai & Thapa, 2015). This technique serves as an effective form of recruitment for participants that can provide rich data and relevant narratives of their experiences working in New Zealand. The use of community collaboration with NZEWT as a local refugee organisation introduced comfortability. The refugee community were engaged in a successful manner and recruited with the notion one must be sensitive to their respective culture and values. NZEWT reputation provided the researcher with an advantage, as the trust and credibility of the organisation had already been established within the refugee community this in turn facilitated a smoother and successful recruitment process.

3.3 Data Collection

Semi-structured interviews were conducted face to face with participants. Participants were provided a consent form and information sheet before starting the interview. This was done in order to attain their legal consent to partake in the research and have a contextual understanding of the research topic. Semi-structured interviews were chosen as this format provides the ability to explore participants' experiences flexibly. Before interviewing the participants, there were 12 formulated questions created and then checked by Supervisor Dr. Ravi Reddy for suitability. The questions directed towards participants focused on the subject matter, on how working in New Zealand was like for the refugee individuals and what circumstances they experienced. We conducted the interviews slightly varied in length due to participant preference in speech however, the majority were between 20minutes to 30minutes. The question guideline allowed for an in-depth exploration of the participants' narratives, with additional questions formulated organically to derive further relevant points. To help participants feel relaxed, interviews were conducted at the New Zealand Ethnic Women's Trust (NZEWT) centre over a two-week period. This venue was selected to provide participants with a comfortable and familiar community environment, which aimed to enhance their openness during the interviews.

The interviews were voice recorded on the researcher's phone and subsequently uploaded to a private personal google drive associated with the researcher's email. This was to enhance privacy and safeguard the recordings of the participants. Following this the interviews were transcribed using FTW Transcriber software, the transcripts were corrected for any grammatical errors by the software then presented to the participants. Once participants were happy with the transcripts thematic analysis was conducted.

Table 1. Interview Question Guide

1. Can you describe your experience of transitioning into the workforce in New Zealand as a refugee worker?
2. Have you ever been injured at work or had to take time off because of work? Please give details.
3. Did you receive any health and safety training or induction at your workplace? Please describe.
4. What are your thoughts on health, safety, and wellbeing in your workplace? Are you aware of the health and safety policies and initiatives? What are they?
5. Do you feel supported in your workplace with regards to your health, safety and wellbeing? Please discuss the input of your employer, supervisors and fellow workers. Please give examples.
6. Can you share any specific instances where you felt your health, safety, or wellbeing were compromised in the workplace?
7. Have you encountered any specific challenges or barriers related to health, safety, or wellbeing in your workplace? If yes, could you provide examples?
8. How does language, communication and culture impact your ability to access and understand health and safety information in the workplace? What resources or support systems do you believe would be beneficial in addressing language-related barriers to health, safety, and wellbeing?
9. What are your thoughts on the role of government policies and community support networks in addressing the health, safety, and wellbeing needs of workers of refugee background?
10. What is the attitude of the community with regards to health, safety and wellbeing at work? Do people care?
11. In your opinion, what strategies or initiatives could be implemented at the organisational level to enhance the health, safety, and wellbeing of workers with a refugee background?
12. Do you have anything to add related to health, safety and wellbeing not covered in our discussion?

Thematic Analysis

Thematic analysis was the appropriate application of analysis for this data corpus. Thematic analysis allows for the identification of patterns within rich and extensive data (Braun & Clarke, 2006). Several prominent scholars argue that thematic analysis extends beyond pattern recognition by interpreting various components of the research topic (Boyatzis, 1998; Holloway & Todres, 2003) This analysis method furthermore provides theoretical freedom by allowing a flexible approach that can be continuously adapted to the needs of the researcher. This form of analysis strength lies not only in flexibility but the ability to provide a platform of analysing different perspectives of participants in turn allowing mirroring concepts to be exposed in the data corpus. However, worth noting this style of data analysis bares no clear agreement on how it should be produced ((Attride-Stirling, 2001; Braun & Clarke, 2006). This in turn allows the researcher to mould thematic analysis in their uniquely applicable format relevant to their study topic and research question.

The thematic data analysis procedure implemented involved following the six-steps outlined in the study (Braun & Clarke, 2006). The first step in phase 1 was “familiarising yourself with data”. This process involved reading the 13 transcriptions of the participants thoroughly through “repeat reading”. This is to develop a comprehensive understanding of the words of the refugee background participants. This phase also involved taking notes and highlighting the transcripts done in the physical format. Once an adequate understanding of the words of participants was gained the next phase involved initial coding. The transcripts of the participants revealed a similar pattern of experiences and attitudes initially coded in the following points.

These codes included self-perception, overworking, workplace injury, lack of health and safety at the workplace, discrimination, lack of government support, community support,

coping mechanisms and lastly language barrier. These initial codes generated served as the link to the themes that have arisen from the data.

Phase three of the analysis focused on searching for themes and finding a way to link the newfound codes into overarching themes and respective subthemes. This stage involved pattern recognition and the comparison of transcripts seeing if there are common links that can be solidified. Phase four involved naming the themes; this phase was essentially trying to fit in the codes with concepts that can justly define the experiences of the participants. This led to six main themes being discovered. The next phase involved defining the themes and refining the overall story the analysis tells us. This in turn links to the final stage which is the production of the report. This stage involves the strong and compelling use of data extracts to break down the themes and link it back to the original study question and topic. Finally, the use of a mind map is utilised to structure the themes and subthemes that have derived from thematic analysis. The mind map aids the study by providing a succinct visual representation of the themes simply presented for comprehension.

3.4 Positionality of Researcher

As a researcher conducting this study, I too share the refugee status initially moving to New Zealand as a child to escape the Somali Civil War. This element of my background was known to the participants due to my connection to the refugee community in Auckland. As experienced previously working and donating time towards community programs. This shared experience with my participants allowed me to connect with them in a deeper way, understanding the challenges and circumstances faced by many refugee background individuals. My position as a researcher was deemed as a 'insider researcher'. This is a title described in literature as a position in which researchers conduct a study within a population they are also members of (Kanuha, 2000). I share a similar identity and in some cases language with the participants, this form of membership enables a view of legitimacy in the eyes of participants. To avoid role conflict however, the participants were given clear warning that this research was for the purpose of a study and served no link to any community organisation. This differentiation ensures role conflict is reduced and participants and research operate within a professional boundary (Dwyer & Buckle, 2009).

3.5 Ethical Considerations

The study topic was presented to the Massey University Human Ethics Committee, which deemed the focus of the study as low risk (Ethics Notification Number: 4000027121). Approval was granted; however, as a researcher, it was a point of constant consciousness that the ethics and privacy of the participants must be upheld. Before the semi-structured interviews were recorded, participants were given an information sheet detailing the focus of the study, as well as a consent form indicating that their personal details would not be published. The refugee background individuals were assured that their narratives would not be presented with identifying details, as this was a valid concern for some individuals who feared backlash from their employers. As a researcher, the moral responsibility of safeguarding the participants' narratives was very crucial. No identifying details were

published, and the experiences of the refugee workers were presented truthfully and carefully.

Chapter 4 Results

This chapter delves into the results and findings of the study, focusing on dissecting and extrapolating relevant themes and key points from the semi-structured interviews. Through thematic analysis, six main themes emerged, each with additional sub-themes. Direct quotes from the interviews are included to illustrate the relevance and meaning behind these themes.

4.1 Workplace Injury description of participants

During the study, the following question was asked to participants *“Have you ever been injured at work “*. The table below summarises the results of this inquiry.

Table 2. Workplace injury table.

<u>Participant</u>	<u>Work Injury</u>	<u>Type of Injury</u>
1	<ul style="list-style-type: none"> Tasked to lift heavy object/s resulting in injury to lower spinal disc. Overworking in a shift over resulting in knee sprain (14hr work shift). Overworking over 70hrs for a prolonged duration 	Chronic Musculoskeletal injury Work related knee sprain Mental wellbeing: Chronic Anxiety inducing stomach pain
2	<ul style="list-style-type: none"> Punched in the face by a patient. 	Physical assault: Resulting in minor contusion
3	<ul style="list-style-type: none"> Slipped at work due to wet spot 	Twisted ankle
4	<ul style="list-style-type: none"> Working from home, fell downstairs. 	Twisted ankle
5	<ul style="list-style-type: none"> Burnt while working in the kitchen Mental exhaustion 	Burn Symptoms of 'burnout'
6	<ul style="list-style-type: none"> Lifting furniture resulting in back pain. High workload resulting in constant stress and exhaustion. 	Minor Musculoskeletal injury Mental wellbeing: mental exhaustion "burn out".
7	<ul style="list-style-type: none"> Lifting heavy construction material resulted injured shoulder. 	Moderate Musculoskeletal injury
8	<ul style="list-style-type: none"> Anaphylactic reaction at work. 	Chronic immune issues triggered by work stress as an ongoing factor
9	<ul style="list-style-type: none"> Stroke 	Myocardial infarction- occurred at work however not directly linked to work activities.
10	<ul style="list-style-type: none"> Slipped and fell downstairs 	Broken Ankle resulting in hospitalisation
11	<ul style="list-style-type: none"> Slipped at work 	Minor ankle pain

Thematic findings

4.2 Workplace place challenges

The first theme 'Workplace challenges' divides into three respective subthemes workplace injury, overworking and lastly lack of health and safety in the workplace. The workplace is the central environmental component of the study. The aim of the interviews was to gain insightful perspective of the experiences of the participants. Interestingly the participants shared many details that corresponded to each other often facing similar challenges and issues in the workplace, throughout this section we will break down the workplace challenges the refugee background participants faced.

4.2.1 Physical Harm

The participant narrated his experience working in New Zealand in the construction industry after leaving high school. With minimal job experience he entered employment which involved hard, physically gruelling labour. This contributed to being constantly fatigued and never feeling quite 100%. He then narrates one day he was working and was lifting a heavy object by himself and felt an intense strain in his lower back. The participant continued working however when the pain did not subside, he went to medical professionals who determined a lower spinal disc was moved out of position. This injury was severe enough to require surgery, which the participant could not afford at the time.

So sometimes that would happen for the whole week, and we would go over way over 70 hours. And yeah, from all that overworking, I actually injured my back pretty seriously to the point where I need a surgery right now there was a clear image that one of my discs in the lower back wasn't as good as it used to be

The findings also highlight events in which physical assault and violence took place. It is reported that participants who experienced violence at work are consistently anxious going into work and not seeing an adequate resolution to the risk of assault in the workplace.

So, I was assaulted at work. I was assaulted at work by being punched in the face by a young man who had psychosis. At the time of the incident, this is during around COVID, one of my colleagues who was with me at the time, who would have been able to prevent that, unfortunately, because she wasn't trained and she didn't know what to do, it led to me getting injured.

4.2.2 Mental harm

Following participants expressed moderate to high level of mental health harm from work.

The participants reported self-identified burnout.

So that also kind of affected me so with burnout came like mental health issues and fatigue and all of that kind of stuff.

So, the real stress started when I got my corporate job, where I felt I was overworked, burnt out even. Never really looking forward to work because I didn't feel mentally 100% when I would be working.

The participant felt consistently stressed over a long period of time. Unrealistic workloads without proper resolution left the participant feeling burned out resulting in him leaving his job. This demonstrates the stressors faced by refugee workers afraid to speak up and find balance in the workplace.

4.2.3 Overworking

Another subtheme of the study is the prevalent and concerning pattern of 'overworking'. The findings indicate that overworking was a prevalent issue with participants reporting they experienced this issue. The participants who reported the effect of overwork on their health and overall quality of life. Participants reported constantly skipped lunch breaks and working late without additional overtime payment. The participant felt his employer set unrealistic standards that were not achievable.

And yes, I would pretty much even work sometimes longer than 14-hour shift, which is not allowed in New Zealand. So sometimes that would happen for the whole week, and we would go over way over 70 hours.

It was very draining. Just to meet those requirements, there were times where I would have to sacrifice my breaks, my lunch break. I would be working overtime. So, working that role, I had to make that my top priority and my health would have to come second.

So, in those instances where if you're sick, you're sick. If you take the day off, but you know that everyone else in the team is having a lot more work to do and then they burn out. So, this is a cycle when the whole team was not really happy with the work-life balance.

There was no balance there was an unrealistic amount of work to be completed and that wasn't just on me but that was on everyone so anytime you'd walk into the department. Everyone looked just drained and down and sad which was not a great place to walk into and there was no balance there was an unrealistic amount of work to be completed.

Several of our participants expressed that they have been overworked, in some cases to the point of illegality. One participant expressed that she worked over 70 hours, often feeling physically exhausted and forced to operate complex machinery while being unrested and tired. Furthermore, other participants expressed how corporate work also produced unrealistic standards, leading to mental exhaustion and chronic stress.

4.2.4 Lack of Health and Safety

The final subtheme the 'Workplace Challenges' theme is 'lack of health and safety'. Lack of health and safety refers to the ill administered and undeveloped protocols in the workplace that fail to create a safe working environment.

I think if they were really doing a health and safety induction that it should have been at least one day or multiple times in a month, just so that it really seeped into my brain. So that I knew where exits were and where to find maybe emergency equipment or maybe somebody needs oxygen at some point.

For example, there's short staffing for nurses across the whole of New Zealand. But that's not an excuse. Sometimes that is the answer given, we're trying, we're hiring, it's not an excuse because there's still people like me and my colleagues that are getting hurt. So, I would say that no, I don't feel safe.

The participants interestingly echoed very similar instances of the lapse of health and safety. The biggest and most consistent issue was short staffing followed by a lapse in health and safety training. This related to rushed induction training and lack of in-depth training. Several of the participants expressed not feeling safe at work due to the poor staffing ratios and overall training at work.

4.3 Identity and belonging

The findings presented an interesting theme, encompassing the shared experiences of refugee background workers interviewed: the concept of 'Identity and belonging'. Refugee background workers are a unique subset of the working population of New Zealand, a minority group that has not been extensively researched in the field of OHS in our nation. This study presented interesting notions from the participants about how they perceive themselves and how others perceive their 'refugee' identity. Furthermore, the idea of cross community collaboration is also investigated to see if refugee background workers also share community ties to assist with their integration into the New Zealand workforce.

4.3.1 Perception

Perception, as a subtheme, refers to the how individuals understand and recognise their own identity. In the context of the study, we breakdown how the refugee background workers identify their selves into the New Zealand workforce and how employers or co-workers perceive them in the work environment. This subtheme provides valuable insights into the societal views and challenges faced by refugee-background workers in New Zealand.

Despite the diversity of the participants in terms of age, ethnicity, and gender many shared common feelings of not belonging and experiencing negative or hostile perceptions from co-workers and employers. The rich narratives of the participants paint vivid illustrations of the complexities and hardship of how it is like being a refugee background worker. We will take a look at relevant quotes that best exemplify the experiences of the participants and compare and contrast to present similar patterns.

Since I moved here at the age of six, I got my first job at 16 and have been working ever since. There have been times when I needed to provide that were very stressful, tough on my body and tough on my mental health. But I had to continue working because I had to carry on trying to make ends meet.

Well, for me when I started going to work, I was kind of forced into it because I started working while I was in year 13, so last year of school, and I needed money to pay for my medical costs at the time, like going to the hospital and things like that, and I couldn't.

I can't say no most of the time or just leave the job because my visa depends on it and the money that I'm bringing to our family depends on it too.

A common self-perception that was echoed throughout the transcripts was the 'provider' identity. Many of the participants ascribed themselves as the provider of their respective households. They believed that it was their duty to work on behalf of their family and provide financial income. This role many of the participants attributed to brought stressors and motivation. The participants felt forced into this 'provider' role where they had to look after their family or themselves. Not one single participant perceived work as a means of flourishing rather a means for survival.

Another important aspect that the participants elaborated on is how they are perceived. Some participants reported being viewed negatively by the employers or co-workers. The majority of refugee background workers who worked outside their community felt they were negatively impacted by their identity. The participants reported that they were perceived to be lacking because of their background.

Because of burnouts and things like that that I have to put really strong boundaries in place. And I say that just because, you know, I'm a black woman and I think I don't feel safe at work. I've never really felt safe at a workplace in New Zealand because of those things. But that doesn't mean I don't want to contribute to work. They don't like women with boundaries. They don't like black women with boundaries.

It was reported feeling unsafe at her work due to their background being misinterpreted where for example because of her identity as a young Black woman, setting boundaries was automatically associated with aggression.

"Yeah, and I think a lot of people I would know were saying things about you know me being unwell or thinking that I was lazy.

It was a tactical way to shame all those people. I think it was a way to shame us and it was contradictory. They kind of were saying take care of your health but when you do try you are looked down upon for taking days off when unwell.

Participant felt being perceived by co-workers and employer as a burden and slowly being pushed out. They felt they were tactically shamed and deliberately disciplined in front of co-workers because of their background.

In addition, appearances were reported to influence the perceptions of employers and colleagues. One of the participants expressed that they felt they were perceived negatively based on their hairstyle, which was negatively associated with stereotypes towards ethnic individuals.

Sometimes may come off as, I don't know what I'm doing, for some people they haven't given me a fair chance. Just because of the way I look, it may seem I'm unprofessional like my hairstyle

4.4 Discrimination and lack of support

A theme in this research is 'Discrimination and lack of support'. Participants felt discrimination based on a range of factors that we will explore. The theme discrimination presents a window into the experiences of discrimination in the workplace and how refugee background workers, can be victims to this injustice even in New Zealand. The key areas of concern raised related to neglected physical health, creation of toxic work environment, workplace bullying and racial discrimination.

I couldn't really trust anyone in the company because I knew that you tell it to one manager, and he'll tell it to pretty much the whole company. And then the whole company knows your business and your problems.

So, there was another big problem that I found is that there is a lot of gossiping and talking behind your back at the company. there was racism to white people because there weren't so many white people in the company. And me being one of them, you know, you could see that we were treated way different to the other people.

This was during work drinks. It was after a long day of work, and they had set up a place for all of us to hang out and chill. There were jokes about certain things and cultures and slight racism that I faced. I think people must that as fun or funny, whatever. There was alcohol and stuff involved, so they thought they could get away with it. But in my opinion, I found it very offensive. I found it very difficult to speak on. I felt like if I did speak on it, that I would get maybe let go.

I was black and when one of my boss said the N-word and I was maybe like two months in and I wasn't sure what the dynamic was with a boss and a colleague and we didn't have any HR so I wasn't too sure like how to deal with the situation.

For example, in this particular case, a person in management said a racial slur and you felt uncomfortable.

Yeah, there wasn't anyone. I just told my manager and she pretty much said there's no point in saying anything because I just have to tell my boss so I kind of had to make the decision to go and talk to my boss myself

In the above examples, it shows that discrimination is a barrier that refugee background workers genuinely face. The challenging dynamics of workplace hierarchies and the absence of support from trusted professional structures like a good human resources and management leave individuals like vulnerable and powerless. All the accounts present a similar pattern of fear and lack of support for refugee background workers.

4.5 Lack of Government Support

Lack of Government support was a theme that was consistently brought up by the participants. Most participants expressed their belief the Government presents with inadequate assistance and support for workers of refugee background workers. Participants highlighted the absence of support nets for the workers and lack of an integration process entering the New Zealand workforce. Participants highlighted several areas where government intervention could make a significant difference, such as providing better access to job training, offering legal assistance to stop workplace discrimination, and enforcing more regulations to hold businesses accountable for negative impacts to wellbeing.

So, when we first moved, we initially received help from the government. But once we settled in a little bit, we kind of had to provide for ourselves.

Oh no, I didn't know about sick days, I didn't know if I was entitled to any, I think someone told me, a friend told me to ask afterwards and I think at that time I didn't have any

4.5.1 Inequality - New Zealand Policy

There was discussion that the New Zealand Government has worked to provide better support and funding to multiple minority groups such as Pasifika and the Asian community. However, it was reported that the refugee community is being overlooked and being blurred into the 'immigrant' category.

Like New Zealand is doing, you know, an increasingly better job at or the government in New Zealand is doing an increasingly better job at supporting Maori, Pacifica and Chinese Asian communities around these sorts of things, initiatives.

And they are represented in policy and all of that kind of stuff in many different ways. So it's being done and it can be done and they are showing that they are improving over time. So it would be great to see our communities considered in that kind of way as well, because ultimately we're all contributing to New Zealand society.

So I guess where is the disconnect if they are already doing these things? Like, how are you actually reaching the communities that are most disadvantaged?

Like, you know, in terms of refugee, migrant, asylum-seeker communities, immigrant communities, we all kind of sometimes get blurred and bunched into one. Constantly seeing in 2023, like, you know, some of our immigrant workers and the conditions that they live in and work in, and they don't know how to advocate for themselves.

4.6 Adaption and Resilience

The tumultuous journey of refugees is marked by their ability to adapt and demonstrate resilience as they settle in new, often unfamiliar lands. Adaption in the context of this study refers to the participants ability to enter new work environments and excel. This also links to examples of when participants use their existing skills and apply it in their jobs. This is known as 'skill utilisation' a subtheme that will be explored through the narratives that were collected. Another important subtheme that is linked to the overarching theme is 'coping

mechanism'. This refers to how participants used strategies to navigate and preserve through harsh conditions and adversity.

4.6.1 Skills Utilisation

There is discussion that community organisations use the skillset of their population to respond to the needs of their community. Participants reported having previous skills of basic skills but over the years have transformed their skillset to being actively aware and educated to address the needs of the community.

They find it difficult in Language, yeah, to talk to us. But after that, they say, oh, it's okay. Just anything you need, how you have to talk to us. And then, yeah, we will help you. Because first, when they come, they didn't know we can help them like financial or we can help them like find a house, find what you call like, yeah.

So school, , we can help them find a school, find accommodation. So the charity helps these new families, refugee families with, you know, finding a house, finding accommodation"

4.6.2 Coping Mechanism

Coping Mechanism is defined as strategies individuals make use of to manage stress, hardship in the present environment. These mechanisms can vary substantially from individual-to-individual basis. There are reports of coping support from community organisations. The participants highlight their own coping mechanisms to help each other find work and integrate into the New Zealand workforce and lifestyle.

Yes, because I've seen some of the ladies they left their husbands back and then when they come here it's a bit hard for them. Sometimes when the class is on I can see some people are crying. They don't sleep at night and yeah something like this. Yes a bit hard. It's difficult for them.

Tell them that and sometimes it's not only learning how to tell them like socialization things. I have to tell them my story I say in New Zealand because somebody with disability walking on crutches come all the all along from all the way from Somalia no family here. I didn't know anybody here. So I have to explain them my situation, I tell them the one day you will become independent.

Some others are coming with their traumas. Some others, they are coming with their tears. Some of them, they come, they think that we are the one, we hold the whole New Zealand.

Then we are trying to support them, but still we need to have kind of protection. And that's why we as a charity organization, we've tried our best to make sure that each and every one get the right information. And through that, we do translating and we are supporting them. But still for them, it's quite a big challenge because where they're coming from, it's not the same.

4.7 Access and Resources

The theme "Access and Resources" relates to the availability and accessibility of relevant information and essential services in the workplace. This theme is represented by two sub-themes: "language barriers" and "information accessibility." From the lived experiences of our participants, we will draw findings on how they navigated their work environments coming from a refugee background. The narratives presented in the transcripts provide insight into how refugee workers adapted to the New Zealand workplace and how pre-existing and post-employment barriers influenced their livelihood from an occupational health and safety perspective.

4.7.1 Language Barrier

The subtheme of 'Language Barrier' was a very prevalent topic of discussion with the participants. Among the participants those who sought refuge in New Zealand at an older age struggled with their English proficiency finding it harder to adapt to the New Zealand workforce. Many refugee background groups newly entering New Zealand face massive challenges with minimal government support for workforce integration. This creates a complex and difficult barrier to employment and access to information.

The majority are quite serious of that. But then seriously, they need more help. Yes. Really a big help. It needs to be there. I can give you as an example, like we have a sample like Afghani people, Afghani people, they themselves, they have three different languages.

And to their groups and then they don't they completely don't understand English.

So once you start talking to them, the support that you can give them as a voluntary, it's a huge effort. But if the government will put some fund through that and then we work together as a group through health and safety, we support them.

You can't explain everything in English to them they will understand better in their own language.

The findings highlight that the lack of language proficiency can lead to misunderstandings and miscommunications, affecting job performance and workplace safety. The participant emphasized that the absence tailored language programs refugee backgrounds individuals will continue to suffer, without adequate support systems in place. A concerning perspective is that when refugees find it difficult to communicate it creates an atmosphere of isolation and frustrations.

4.7.2 Information Accessibility

The ability to access information in the workplace is a very important right to workers of all backgrounds. The refugee background community faces several unique challenges that often inhibit their experiences in the workplace. The participants narrated not knowing crucial worker rights including how to report injuries, sick days and the legality of maximum work hours. The study findings produced it is very apparent that there is a gap in knowledge regarding information access, thus we will take a look at the narratives that explore the lack of accessibility. The study presents the theme of refugee workers not knowing their rights.

Oh no, I didn't know about sick days, I didn't know if I was entitled to any, I think someone told me, a friend told me to ask afterwards and I think at that time I didn't have any sick days but I thought if I didn't have any sick days I can't take a day off.

I didn't know any health and safety rules around working, I didn't know much about work ACC, I didn't know anything about time off, I didn't know about any of workers' rights unions or anything like that, so it was really confusing and I didn't have a lot of information around me.

Were you aware of your rights as a worker, that you have the right to go to your GP and file an ACC claim even if it happened at work? Did you feel as if you could do that in that situation, that you could go to your GP and file an ACC work injury claim?

One line also stands out to me that they told us never go to ACC

The participants felt there should be Government interventions to teach refugee workers about their rights and provide information in their relevant spoken languages. It was suggested that WorkSafe NZ should play a more active role in providing workshops to the refugee community aiding a seamless transition into the New Zealand workforce.

Yeah, so I may have something else to add. I have noticed that the quota for the refugees in New Zealand have increased, but I haven't noticed an increase in accessible documentation, for example, contracts and stuff being translated.

So although people may be agreeing to certain requirements or even benefits that they're entitled to, they may agree. They may say they understand, but because of the language difference, they may not truly understand and may not be getting the most from their contract or from their employer.

Something along those lines or even if it is someone from, you know, WorkSafe holding a workshop or a seminar in different languages for more interactive material, that would be great as well."

4.8 Community Engagement and Empowerment

The last theme of the study refers to the joint effort of the community to address integration in the New Zealand workforce. These participants provided valuable insights into various community-led programs and efforts designed to empower refugees and facilitate their smooth transition into the workforce. The community sector contributes to bridging the gap that governmental organisation may leave, through a united front. Through actions like

advocacy and tailored program refugee community organisations offer the necessary skills to enter the workforce.

It's not enough because people they want laptops or computers, yes, because some of the things are like. They have to watch a CD or video that's about the roundabout. Coming from left, the car coming from left or which one you have to give away, yes, so we need more resources like computers.

I really like it now because I've been working since 2005 with a charity here in New Zealand, Auckland and the work has also improved my English because when I came to New Zealand, I didn't speak that good much English and I was working with UNICEF

I upgraded my English while working with the community with different people. I teach them Learner lessons and literacy

The participants reported that for many refugee individuals the community serves a safe space. The challenge of Covid 19 impacted many workers. For refugee workers in particular, one participant details the combined effort of the Government and community organisation. The Covid 19 Community Connector served as a program to ease the hardship of refugee and immigrant population.

As well as migrant and other vulnerable community. So mostly like big families say, oh, I don't have enough. I don't have some of the case. I saw the lady, when the COVID comes, her husband, her bigger son, they lost the job. So after that, she's email asked, she need help because she had her kind of fault to pay her

Yes. Because she said, I don't have any support. I don't have anyone to help her. So yeah, we did pay her bills.

4.9 Results Chapter Summary

The chapter presented six key themes derived from the collected data, along with subcategories under each. We observed how workers from refugee backgrounds faced several workplace challenges regarding injury, both physical and mental, alongside how a lack of health and safety played a contributing role. The findings also revealed how refugee workers perceive themselves and how their co-workers and employers perceive them, often

uncovering preconceived notions and negative stereotypes. Additionally, we explored how the lack of information accessibility also played a detrimental role in the success of refugee workers and how it was linked to further negative outcomes once workers were injured. The role of the community and the existing support systems, or lack thereof, from the Government, was discussed, highlighting areas in need of improvement and opportunities for collaborative efforts to improve the working lives of workers with refugee backgrounds.

Chapter 5 Discussion

The previous chapter presented the findings of the study, with six themes: (1) workplace challenges, (2) identity and belonging, (3) access to resources, (4) adaptation and resilience, (5) discrimination and lack of support, and (6) community engagement and empowerment.

This chapter compares the findings of this study with relevant research into the occupational health and safety of refugee workers. This discussion section seeks to synthesise the results of the study and explore the broader implications for policy and practice. Through a detailed examination of the themes and relevant sub themes, we will provide a thorough view of the experiences of the participants and recommendations for further improved integration into the workforce and safeguarding of their wellbeing

The first main theme of 'Workplace Challenges' produced significant findings within the subthemes explored in the previous chapter. The subthemes workplace injury, Overworking, and lack of health and safety produced a pattern of consistent challenges for the participant. The participants reported injury at work ranging from minimal injury to chronic. This raises the question whether these experiences of these participants are reflected in with findings from other studies. This section will focus on the comparison of similar studies conducted abroad and domestically. It is important to note the findings produced in our results indicate a small scale locally based inquiry, thus limited on the basis of generalizability and cannot be concluded to the entire refugee working population of New Zealand. The first subtheme that will be explored is the rates of workplace injury in New Zealand and the current Governmental statistics to observe if there is a pattern occurring.

The rates of workplace injury in New Zealand are recorded by ACC and presented to the public through Statistics New Zealand, the government agency that provides sector and public data for viewing. It is worth noting that the government does not specifically record rates of injury using the associated 'refugee' classification. However, we are able to

synthesize an interesting phenomenon from the data. The 2022 injury rates by ethnicity showed that the biggest group injured at work was the 'Other' ethnic group, a composition which includes Middle Eastern, Latin American, African, and other ethnic categories. This population overrepresented almost double the nearest ethnic group (Pasifika). The 'Other' ethnicity had a claim rate of 180 claims per 1,000 FTEs in 2022, while the Pasifika category had 99 claims per 1,000 FTEs. This is an outstanding figure considering the 'Other' ethnic category accounts for a small share of the working population (Statistics New Zealand 2022). This is quite relevant to the study as most of the ethnicities attributed to the 'Other' category are often refugee backgrounds similar to the participants interviewed, who classify as 'Other' in the statistical format of New Zealand.

This ethnic pattern of worker injury rates in New Zealand has been consistent over the last five years. The 'Other' ethnic group has presented the highest injury rates as far back as 2018, with the only exception being the previous year, 2017, when Māori workers had the higher injury rate. From 2018 to 2022, the injury rates showcase that the 'Other' ethnic group is overrepresented despite making up a small percentage of the working population (Statistics New Zealand 2019; Statistics New Zealand 2020; Statistics New Zealand 2022). The most type of common injury for the previous three years were classified as 'soft tissue' injury. The latest figures of 2022, with 143,900 claims classified under this category of injury, this also accounts for 65% of all injury claims and 64% of all entitlement payments (Statistics New Zealand 2022). Our findings showed that this was the most common type of injury, with five participants experiencing it at their workplace. One participant reported a serious musculoskeletal injury from long hours and heavy lifting while working in construction in New Zealand after high school. With minimal job experience, they took on physically demanding labour. Another participant also reported a soft tissue shoulder injury from heavy lifting in a labour-intensive job.

The ACC provided data provides a small insight to the commonalities of injury and New Zealand. However unfortunately, due to a dearth of domestic literature focusing on refugee workers, there are no quantitative studies for the work injury rates of refugees in New Zealand. We are unable to draw direct comparisons between our findings and broader national statistics for the refugee population. This gap in the literature highlights a need for more targeted research for the occupational health risks faced by this community. Notable studies exist for migrant workers, who are often combined with refugee workers, not making a definitive distinction, which further marginalizes the refugee background population.

Health and Safety New Zealand was put under intense scrutiny when the tremendous tragedy of the Pike River mines occurred. This incident catalysed a national conversation on health and safety. The Pike River incident resulted in the deaths of 29 men, due to an explosion resulting in a lapse of health and safety due to inadequate methane drainage and non-functional gas sensors among many other errors (*Royal Commission on the Pike River Coal Mine Tragedy*, 2012). This tragedy produced two Government inquiries: the Royal Commission of the Pike River Mines and the Independent Taskforce on Workplace Health and Safety. The latter inquiry was issued by the Labour Government in 2012 to address the rate of workplace fatalities and occupational injuries. The Independent Taskforce on Workplace Health and Safety in New Zealand compared the fatal occupational injury rates in nine countries over the period of 2005-2008. This government-initiated taskforce uncovered that the nation suffers from the highest fatal occupational injury rate, with 4 fatalities per 100,000 persons. In the comparative inquiry, New Zealand ranked the highest, followed by Spain, France, and Australia. New Zealand presented the highest rate of deaths among OECD countries, leading to an overhaul of health and safety legislation. The Health and Safety at Work Act 2015 was implemented as a result.

Further studies conducted in Australia presented a similar pattern of concern. Australia has lower rates of workplace fatalities but faces a similar overrepresentation of ethnic workers

being injured at work. A noteworthy study conducted by Clarke (2015) focused on survey data from a range of occupational fields to investigate the prevalence of non-fatal workplace injuries among foreign born workers in Australia. The study used a multitude of individual level survey data from 2005-2010, his findings indicated immigrants as a whole experience a different level of occupation risk probability. Based upon the mean of the occupational risk immigrants face a high level of occupational risk, with Asian immigrants presenting with greater levels of risk (Clarke, 2015).

This study showed similar disparities occurring in Australia; however, the same consistent issue remains that the 'immigrant' category examined does not differentiate between refugees and migrants. However, the study by Ziersch et al. (2021) conducts a similar approach to our study. The authors focus on refugee women interviewed in-depth in a qualitative format. The study further uses thematic analysis to draw relevant findings that show a common theme of precariously employed women facing work-related injuries. In the study, the narrative extracts of several women are presented, showing self-reported issues of musculoskeletal pain, soft tissue injury, and mental injuries in the form of chronic stress and anxiety. The study showcased how precarious employment for women of refugee backgrounds leads to poorer health outcomes, especially in the realm of their mental health. Many of the participants felt constant fear and punishment under Australian laws if they reported ill-treatment or work-related injuries. Ziersch et al. (2021), argued the negative impact of employment relations based on the broader neoliberal policies in Australian governance that add to what was described as 'layers of vulnerability.' In the context of our study All thirteen participants interviewed in this research reported health and safety concerns, covering a variety of issues. Some of the issues reported include lack of accessibility for disabled refugee workers, the lapse of nursing medical protocols, and inadequate regulations for lifting heavy objects.

The experiences faced by refugee background workers in Canada reflect similar challenges identified in our study. A scoping review by Kazi et al. (2019) synthesized 28 journal articles examining the occupational well-being of refugee workers and identified several factors contributing to injury that mirrored our findings. The authors discovered that language barriers were significant contributing factors to workplace injuries. Many refugee background Canadian workers suffered injuries due to not understanding the health and safety protocols in place, often highlighting a gap between management and staff. This was also reflected in our findings, where language barriers were a prevalent subtheme that participants felt impaired their access to health and safety material in the workplace. This was also reflected in our findings, where language barriers were a prevalent sub-theme that participants felt impaired their access to health and safety material in the workplace. In our study, participants who sought refuge in New Zealand at an older age struggled with their English, finding it harder to adapt to the workforce.

This was also reflected in the study by Otero and Preibisch (2016) which found a direct correlation between poor English proficiency and higher rates of workplace injury among South Asian immigrants. Furthermore, an additional issue exacerbating workplace injury was the lack of health and safety training, as mentioned in the studies by Kosny presented identical challenges where refugee workers were improperly trained and positioned into employment that led to injury, this was prevalent in both studies conducted in Canada and Australia (Kosny et al., 2017; Kosny et al., 2020) . In our study, this too was a factor, particularly when participants in the healthcare industry were not fully oriented with the right knowledge to treat high-risk patients. Kosny's study showed a similar example of inefficiently trained refugee workers entering high-risk scenarios. These parallels between Australia, Canada and New Zealand highlight the importance of addressing language barriers, providing comprehensive OHS training, and supporting recent refugee workers to improve their occupational health outcomes and integration into the workforce.

Another area of relevant discussion is how refugee workers are viewed and treated in the workforce. The findings of the study demonstrated identity and belonging are crucial aspects of the integration of refugee background workers into the workforce. The findings indicated that a significant portion of participants felt isolated and even discriminated against based on their identity. The study showed that participants viewed themselves as hard workers and felt they often had to overcompensate in their work to feel recognised. Issues such as racism and discrimination were prevalent, with participants feeling negatively perceived by their employers and co-workers.

There have been several domestic studies produced in New Zealand that have examined the perceptions and challenges faced by refugee background workers within the last two decades. The study conducted by Butcher et al. (2006) served as a detailed insight into the experiences of discrimination and social exclusion among migrants and refugees. The study published by Massey University's School of Sociology served as an instrumental foundation to investigate the experiences of refugee workers. The study reflected similarities with aspects of our study, opting to use ethnically diverse participants from an array of different backgrounds. Interestingly, this study also reached out to migrant and refugee community organisations to aid with participant recruitment, a method also applied in our methodology for recruiting refugee workers. The authors interviewed refugees from Pakistan, Iran, Afghanistan, and Somalia, a very similar demographic makeup to the participants our study recruited. The findings demonstrated refugees often face discrimination in several spheres: employment, housing, education, and access to services. The report highlights the impact of discrimination on the wellbeing of the refugee and migrant workers. Many participants of that study reported very high levels of anxiety, depression, and stress without adequate support systems.

The findings reflected by Butcher et al. (2006) bear almost the same exact concerns over a decade later. Refugee workers we interviewed reported the exact same chronic stress and discrimination in their employment. The 2012 report by Statistics New Zealand, "Working Together: Racial Discrimination in New Zealand," provides contextual understanding of racism faced by migrants and refugees. The study used data from the New Zealand General Social Survey (NZGSS), indicating that 10% of New Zealanders felt discriminated against in various aspects of society. The results indicated the biggest form of discrimination was in regard to race/ethnicity. The report showed six percent of respondents (an estimated 187,000 New Zealanders) felt they were discriminated against due to their ethnicity (*Statistics New Zealand, 2012*). Another concerning revelation was that discrimination was most common in employment situations. The data showed 4.3 percent (or an estimated 143,000 New Zealanders) said they had been discriminated against, either while at work, or when applying for (or keeping) a job or position. This is very similar to the experiences reported by the participants in our study.

A recent report for comparison, Tan et al. (2024) conducted an in-depth narrative of studies from New Zealand and international papers on the topic of 'Racism and Employment'. The narrative review looked at experiences of racism from a broad spectrum that included Pasifika, Māori migrant, and refugee workers. With such a diverse spectrum of communities, similar patterns of racism and discrimination in the workplace were found. In the authors' review, they specified a compelling study by Lepina (2003), which highlighted how refugees experience an intersectional form of discrimination due to their skin colour, religion, beliefs, and customs, especially refugee women who are underrepresented in the labour force. Furthermore, a key finding from Nachowitz (2015) indicated that foreign born workers compared to minority ethnic individuals born in New Zealand, find it far more difficult to sustain employment. This finding was present in our study, participants born in New Zealand from a refugee family and those who immigrated to New Zealand later, having spent their formative years in their homeland, struggled to find employment. Those who were raised in

New Zealand found jobs easier compared to individuals who immigrated in adulthood. Though this difference favours refugees who were born in New Zealand, both types of refugees experienced similar negative perceptions associated with their character. The difference in perception may be due to bias, which was examined in the study of (Ray, 2019). The study found employers tend to hire those who fit in their predominantly 'white organisational culture', even when candidates present with similar credentials.

Employers often hire those who emulate a similar cultural connection, considering individuals like refugee workers to be more foreign and alien (Mesui, 2019). This also links to the context of our study, one of the participants highlighted their experiences of racism in the workplace. The participant noted the company they worked for neglected their physical health and created an unsafe work environment. The participant experienced workplace bullying and racial discrimination, being the only worker of Eastern European descent and treated poorly. They felt unable to speak up for their wellbeing, with supervisors assigning them dangerous tasks alone. The company displayed racism, with microaggressions related to the participant's skin colour and refugee status. The employer exploited the participant's precarious immigration status, leading to fears of being fired if they complained. Additionally other participants also reported racism and harassment, including derogatory language from upper management. In a specific example one participant tried to report such incidents, she was discouraged because it involved her boss. The lack of human resources and cultural sensitivity in her workplace also led to her feeling alienated, anxious, and stressed. This resulted in her leaving her job due to racism.

The theme 'Access to Resources' served as a critical theme in the context of the study. The theme produced two subthemes identified in the analysis, 'language barrier' and 'information access.' In our findings, it was clear the majority of the interviewed participants felt there was not adequate representation of resources in their home tongue. Many participants noted never seeing their language translated in the public or private sector of employment. A

significant portion of the respondents never knew about the work rights entitlement they legally had, which included sick days, ACC applications, incident reports at work, and human resource correspondence, to name a few. In this section of the discussion, we will review how the findings of the study correspond with academic literature in New Zealand and overseas.

The most substantial barrier towards equitable outcomes in the workplace is a language barrier, this was key point prevalent in the findings expressed by a portion of the participants. It is worth noting that in the study the diverse age range presented different language fluidity with some participants being young refugee workers who were raised in New Zealand and others being participants who immigrated at later age. A notable study of comparison is the study conducted by Ministry of Business, Innovation & Employment. The study used a qualitative method interviewing 28 former quota refugees who arrived in 2016. Around half of the participants were men and half were women from a diverse background stemming from Africa, Southeast Asia and South America. The diverse format of the study bears resemblance to our methodology. The study essentially focused refugees who lived in New Zealand for 3 years, who were newly settled (*Ministry of Business, Innovation and Employment 2021*).

The study found English fluency had the most impact on former refugees' work situation. The participants who lacked employment presented with a lack of English fluency, often finding it difficult to integrate into the workforce. In contrast the participants who reported the most success was those who showed improvements in their language capability Data in the study presented three years on a third of the former refugees attained employment. When interviewing those who worked in Employment acquired either part time, casual or temporary work as the dominate trend. A portion of the workers in the study narrated they had to enter the workforce straight away due to a burden of provision. Those living under strenuous circumstances advised their English level did not improve due to not having the time to

undertake further employment. This study conducted by Ministry of Business; Innovation & Employment offered an essential insight to the lives of refugee families settling into the workforce (*Ministry of Business, Innovation and Employment 2021*). In our study we saw similar narratives and situations faced by the participants interviewed. The burden of provision was a significant challenge many of the participants faced. One participant reported not being able to enter study due to such financial constraints and pressure. This was similar to a portion of the participants interviewed by the Government ministry who experienced the same sentiments.

Another important finding worth discussion and contemplation is the difficulty of information accessibility for refugee workers. Coupled with the existing language barrier, many refugee workers struggle to find relevant occupational health and safety material at their workplace. The majority of the participants interviewed reported not being aware of their occupational rights as workers. The most staggering of revelations being some refugee background workers did not know they were legally entitled to sick days or legally entitled to apply for ACC. This lack of information access resulted in detrimental outcomes for a lot of participants.

The study highlights a clear issue: a lack of knowledge coupled with a language barrier leads to poor outcomes for the participants. The experiences of the participants relate to the concept of occupational deprivation. Occupational deprivation refers to a situation in which individuals or groups are denied their legal rights in the workplace, preventing them from accessing the resources they are entitled to. Several studies produce similar findings, such as factors like isolation, language barriers, unfamiliarity with the new environment, inadequate social supports, poverty, discrimination, and inaccessible services linking to deprivation (Aikawa & Kleyman, 2021; Simich et al., 2005). Simich and colleagues (2005) argued that refugees face social exclusion that limits their awareness of available options, leading to loneliness, discouragement, and loss of identity. Similarly, Campbell and Turpin

(2010) found that “refugees experience higher levels of emotional, psychological, and social stress.” This was absolutely a pattern in our study; the majority (11/13) of participants felt stressed, anxious, and fatigued in their workplace. The inability to access relevant information to treat their stressors led some to burnout and even physical injury. When participants were questioned on how to improve the language barrier and information accessibility, many turned towards the Government and community for assistance, suggesting that education should be prioritised for newcomers of a refugee background. This will be further explored in the discussion.

Refugee background workers face a multitude of challenges, as highlighted in the findings. Despite these challenges many of the participants demonstrate admirable adaptation and resilience preserving through challenges and integrating into the New Zealand workforce. The process of adapting to the New Zealand work environment includes skill utilization and coping mechanisms. In the findings we observe how refugee workers use their experiences to aid their fellow community members.

The ability to transform existing skills and apply it to new environments is a critical aspect needed for successful integration in the workforce. Many refugees enter the country with their own unique skillset and experience however for many it is not credible in the eyes of their host countries. Within the refugee community you will find individuals highly skilled Doctors, lawyers, Scientists unable to work in their respective fields due to the Government not recognizing their qualifications. Several bodies of research have extensively studied this phenomenon that we will review and contrast with the results of our study.

Researchers have classified this phenomenon as a systemic issue within many Western nations' labour markets. This systemic exclusion of refugee skillsets is often referred to in literature as a 'labour market shelter' (e.g., accreditation bodies, professional associations, and government agencies). Essentially, labour market shelters refer to bodies or groups of

individuals that safeguard the local workforce and employment opportunities (Lee et al., 2020). This, therefore, poses significant impediments for refugee employment; those who hold foreign credentials are not recognized and often lack a pathway to integrate their skillsets into their new host workforce. Labour market shelters are the main facilitators for the accreditation of qualifications and training for successful workforce integration. However, due to high standardized localized procedures, entry into higher status paying occupations and professions is immensely difficult to achieve despite efforts towards bridging courses. In some cases, institutions that guard prominent occupations may take refugee individuals years to enter (Brell et al., 2020; Krahn et al., 2000).

Further research indicates that labour market shelters offer a lack of support for refugee workers Kosyakova and Kogan (2022) by considering refugees' prior education or work experience as redundant, often applying strict regulations in the accreditation of foreign qualifications. An example of this is in Canada, where the devaluation of prior education for refugees is widespread. Many refugees with qualifications from their home nations are rejected completely. This creates an occupational shift, forcing the struggling immigrants to work lower-skilled jobs in precarious employment conditions (Krahn et al., 2000). This form of marginalization stems from different standards of practice across countries; developing countries are viewed as having an inferior education system (Guo, 2010). As a result, this is often interpreted as 'systematic discrimination' whereby prior qualification and experience are denied on the basis of their background and home nations (Lee et al., 2020).

Although education is seen as a factor of meaningful employment, for refugee workers, studies show otherwise. For example, (Cheng et al., 2021) conducted a review with refugees in Australia and found pre-immigration education is negatively correlated with employment outcomes. In the study refugees who immigrated to Australia, despite being educated, still presented overwhelmingly low employment outcomes. A similar example is the study conducted in the UK, which showed that refugees who held previous managerial positions

and higher educational backgrounds, such as postgraduate qualifications, took longer to find suitable employment. This was due to difficulties in converting their qualifications and the dearth of relevant bridging courses (Roy et al., 2020). Refugee workers have continuously been observed to face a drop in occupational outcomes post-immigration; however, the decrease in quality of life is much steeper for refugees (Chiswick et al., 2003).

Despite these systemic barriers, refugee background workers in our study demonstrated remarkable resilience and adaptability. An example of this is refugee-led organizations, which offered employment for several participants in the research. Their narratives present a hopeful image of skill utilization and incorporating their skills from their home nations into the New Zealand workforce. In the findings, this was highlighted when women who worked for a refugee-run charity were able to use their knowledge of textile fabrics and sewing and apply it in their workshops. The organisation they worked for allowed them to be trained and work for themselves, as well as the community-based provider, by stitching and selling garments. Additionally, the organisation facilitated a supportive environment where refugee women have a place to network and uplift each other.

The organisation uses their refugee clientele to allow for cohesive integration into the workforce. As discussed with the participants who work for this charity organisation, they mentioned that the charity provides translated material in 14 languages. This has allowed many people to understand the New Zealand workforce through a refugee lens. Over time, participants improved their technical skills and developed relevant business skills, which were crucial elements for their success. All three participants we interviewed who worked for a refugee charity discussed how their integration into the workforce involved upskilling in English, access to translated material, and a supportive environment. This allowed them to secure long-term employment without hesitation, producing more favourable employment and health outcomes compared to the refugee workers interviewed who did not know about community providers. The narratives of these participants serve as an interesting point of

discussion on whether community organisations and government organisations can work together to benefit the successful integration of refugee workers and safeguard their overall well-being.

A major point of discussion in the study is the perception of governmental support among refugee workers. The findings reveal that most participants feel the government does not consistently provide dedicated support for refugee workers. Refugee workers expressed sorrowful sentiments about being ignored on a larger scale, often feeling marginalized and considered a forgotten community. This is a significant finding that needs thorough analysis to understand the overall refugee perspective towards the New Zealand government. The implications of this perceived lack of support are critical for policymakers and employers who aim to foster better integration and well-being for refugee workers in New Zealand.

Our study demonstrated several examples of perceived lack of support at a governmental and organisational level. One participant commented on his journey as a young child entering New Zealand from Asia with his family, noting the lack of support for integrating into the workforce. Initial government assistance was temporary, and once settled, they were left on their own. He highlighted a critical gap in the current support system, particularly regarding workforce entry without prior knowledge of worker rights and responsibilities. This issue was not unique to him. Another participant, entering the workforce after high school, expressed similar concerns about the lack of essential knowledge about labour rights, which was not covered in her education. She did not know workers were legally entitled to sick days, illustrating a significant gap in awareness among refugee background workers. Similarly, another participant who entered the construction industry at 18 to support his family was unaware of his right to independently file ACC claims regardless of visa status. This lack of knowledge delayed essential healthcare treatment he needed. These examples show that refugee background workers lack education on their rights and legal privileges, an

area insufficiently addressed by the New Zealand Government, highlighting the need for improved educational support for this vulnerable population.

The refugee resettlement program created by the New Zealand Government serves as the initial entryway for refugee-background individuals to enter society. However, after the completion of this program, many refugee individuals often face an array of challenges integrating. Research indicates that the resettlement program often underscores the significant issues faced by refugee individuals and families, including systematic discrimination, inadequate further government support, and policies that inadvertently foster dependency rather than independence (Marlowe et al., 2014; Sampson et al., 2016; Ziersch et al., 2020). Many refugees resettled into their new society struggle to access adequate support from government services, which hinders their ability to secure employment. In a recent study reviewing resettlement the author Jasperse (2021) reviewed the refugee resettlement process and interviewed refugees and workers who assist with resettlement. In the study, one in five refugees felt unfairly treated by Work and Income and Immigration New Zealand. A portion of the individuals experienced racism and societal prejudice, making it difficult for them to feel confidently equipped to enter the workforce. Our nation has been criticized in literature for creating a system of dependency for the refugee population, who are often overrepresented in welfare benefits and underrepresented in the workforce.

A contrasting report by the Ministry of Business, Innovation and Employment 2021, focused on the long-term settlement and integration of refugees in New Zealand. The report focused on an array of issues including housing, employment, social services etc. However, a key finding that relates to the topic of our study is the employment demographic. Refugee background worker have an average personal income of \$381NZD in comparison to the average weekly income of \$687 for the population (*Ministry of Business Innovation and Employment, 2021*). The study also further elaborated fifty one percent of the families reviewed received government benefits as their main source of income while 27 percent

received wages or salaries and 8 percent were self-employed. Furthermore, almost three-quarters of those ages 45-64 received a benefit the highest age demographic. Another concerning factor is 63% of former refugees said they did not have enough income to meet their everyday needs, 35percent had enough money however 2% had more than enough. This government report shows a concerning reality for refugee background workers and their family situations. This demographic is economically marginalised and suffering to make ends meet.

The above-mentioned statistics and demographics illustrate a common pattern in the study we conducted. Our participants worked in different industries like healthcare, labour, and the social sector. The majority of participants operated under precarious conditions and low-income occupations, with some working in sectors that have completely disregarded their health and safety wellbeing. These conditions exacerbate economic vulnerability, leading to a cycle of instability and harm. The combination of high-stress environments, coupled with inadequate government support and discrimination, has led to significant challenges in successful integration for the refugee workers we studied.

To address these issues, policymakers and the Government need to review strategies to present better health outcomes for refugee background workers. Many of the participants suggested having resources provided in their languages, having workshops to teach employment rights, and even possibly instituting more power to an independent employment regulatory body to investigate breaches and complaints regarding health and safety. Another suggestion was for employers to have a bigger role in fostering a healthier, more inclusive work environment. Several participants experienced racism at their worksites, feeling that their backgrounds were perceived negatively. The form of discrimination was not limited to ethnicity or background, with other factors like age and gender being areas of unfair scrutiny. The Government should investigate and address the systematic racism that refugee background workers face. Possible workable solutions involve requiring or promoting

diversity and equitable employment for large organisations. This is not an uncommon practice where diversity is already promoted for Tangata Whenua and Pasifika residents; this could perhaps be a building block in contributing to a more inclusive society. The constant experience of our participants indicates how many of the refugee workers we talked to felt like they are the forgotten population. Although many of the participants firmly and happily call New Zealand their home, there is a constant attitude of feeling marginalised and ignored by wider society as a burden rather than a contributing demographic to the fabric of the nation. This represents a wider perspective of refugees enduring tough situations presented in the findings, including injury whether mental or physical.

The study shows that this demographic is struggling yet has no other circumstance but to persevere and weather a storm of injustices due to meeting economic and familial responsibilities. The Government has a substantial task to improve the resettlement process and further improve employment outcomes. We note our study did not investigate the resettlement process in depth, however, there is room for further longitudinal research into the lives of refugees settling into the country over the span of two decades. This form of research would be able to further identify areas of needs and strengths for this demographic. Furthermore, studies like this can help create more targeted policies that not only support the economic integration of this population but also support the physiological and psychological wellbeing of refugee workers. It is essential for future policies to be derived from relevant studies detailing the lived experiences of refugees to ensure an equitable approach to their integration and uplifting. In order for our country to live up to its multicultural inclusive image this relatively new subsect of the population must not be overlooked rather given a chance to contribute to the workforce with dignity and equality. These are values that represent the overall culture and social construct of this society.

'Community' an important theme and concept throughout the fold of this study. The method of the study involved reaching out to a leading community organisation in central Auckland.

New Zealand Ethnic Women's Trust took part in assisting the research by allowing us to recruit for participants at their community programs/events. Although this study was able to work with a local refugee organisation our findings suggested many of the participants were not in touch with the refugee community. This trend was consistent with younger participants aged between 20-26 years of age. When questioned about the role of community several interviewees were unaware of community organisations that offer integration programs into the workforce. This suggests there may be a gap between the community and its younger working population. Additionally in the results section we elaborated on the community's engagement process with refugee workers and individuals. The participants who worked for a community organisation whether NZEWT or another agency described the impact of the community. NZEWT plays a key role not only providing employment to the community but also acts a sense of stability for those in need. The organisation provides English courses, sewing classes, driver license programs among other essential programs. This was a point of discussion from the participants who they themselves used these programs to enter employment. This therefore raises a meaningful question; can these organisations work with the Government to provide better occupational health outcomes for refugee workers and families overall? We will engage with studies that focus on the community and their role in occupational outcomes.

Community organisations play a pivotal role in the integration of refugee background workers. Through an occupational health and safety parameter, we will explore the evidence of the benefits of community-led initiatives for refugee workers. Non-Governmental Organisations (NGOs) are at the forefront of the refugee community. Many organisations throughout New Zealand specialize in assisting and aiding refugee families post-resettlement. NGOs often provide essential services such as English classes, employment training, mental health support, housing, and advocacy. They offer imperative assistance in navigating the local job market (Skyrme & Ker, 2020). Language acquisition is particularly crucial as it is among the most basic requirements. This is because it directly impacts

refugees' ability to secure employment, access healthcare, and integrate into the community. Effective language programs not only improve communication skills but also build confidence, thereby enhancing refugees' ability to participate in the workforce and community activities safely and effectively (Saini, 2017). This was prevalent for some of our participants who noted they benefited highly from the NZEWT programs, particularly the English language course.

Many refugee individuals sign up for community-led initiatives to improve their language skills, often taught by former refugees. This creates an environment of trust and recognition among refugee people. In New Zealand, refugee community organisations contribute highly to building the confidence of newly immigrated refugee families, creating impactful programs often with limited resources (Skyrme & Ker, 2020). NGOs not only contribute to employment outcomes but also create a space that promotes the well-being and safety of refugees. In the New Zealand-based inquiry by Skyrme and Ker (2020) the findings highlight that refugee organisations deliver positive programs through their grassroots connections and adaptability. NGOs developed tailor-made programs for their clientele to fit the needs of refugees, considering their diverse backgrounds and needs. By building a cohesive safe environment for social interaction and the development of fundamental work skills, they improve the overall mental and emotional health of individuals. This supportive environment is crucial from the OHS perspective as it addresses psychosocial risks of loneliness and isolation associated with trauma, which are common among refugee populations (Saini, 2017).

The New Zealand Government currently collaborates extensively with community organisations and NGOs across various sectors. In the context of the study conducted, workers from the New Zealand Ethnic Women's Trust (NZEWT) detailed their positive experiences working alongside government agencies. One notable example in the semi-structured interviews were NZEWT participants explaining the Covid-19 Framework

response program. This initiative aimed to address the immediate needs of the refugee community in Auckland during the pandemic and extended to support families facing economic hardship. The program was initially founded to respond to the pandemic's adverse effects on the refugee and migrant communities from 2022-2024. The program evolved further in 2023 to address broader disparities faced by refugee individuals and families. The two-year program yielded successful results with the initiative providing support for over 1,000 migrant and refugee families (*New Zealand Ethnic Women's Trust, 2023*). This program served as testament to the potential of government and community organisation partnerships in addressing the needs of this unique population. Community organisations using their existing clientele and workers can create comprehensive support systems that are culturally sensitive. This can be applied theoretically to employment support. The findings of this thesis suggest the need to improve the way refugee workers are integrated into the New Zealand workforce. The experiences of the participants detail very challenging often unjust circumstances that the individuals had to navigate without support from their employer or Government. Our recommendation for the Government is to heed the experiences of refugee workers. Further studies have to be conducted with this community to address the dearth of occupational health and safety literature towards this demographic. The creation of more community lead initiatives backed by the Government can create more lasting positive results.

Chapter 6 Limitations of Study

This study has limitations particularly due to the sample size that only provides a snapshot experience of the refugee community. A further limitation is that the study was only conducted in the Central Auckland region and does not fully encompass the experiences of other refugees resettled in different parts across the country. In order to address these limitations longitudinal studies with the refugee community across New Zealand can foster a stronger inquiry into the working conditions of these individuals. However, this study serves as a steppingstone for further research in the OHS field. This will further aid policy makers in making informed decisions in terms of funding and resource allocation for this demographic that feels sorely under-represented.

Chapter 7 Implications for future research and practical interventions.

7.1 Targeted Research and Data Collection

There is a clear need for targeted research on the occupational health risks faced by refugee workers in New Zealand. Current data is scarce and merges migrants and refugees under the 'other' category. Furthermore, the language used in Journal articles nationally and internationally also merge migrant and refugees into the 'immigrant' categories making it difficult for identify trends for the refugee community. Improved data collection methods that distinctly classify refugees can lead to improved informed policies and interventions that can benefit the refugee population.

7.2 Enhanced Health and Safety Regulations

The consistent overrepresentation of injury rates among the 'Other' ethnic group, which includes many refugees background groups, highlights the need for enhanced health and safety regulations and enforcement. Tailored workplace safety program by the Government in collaboration with relevant community organisations can lead to better outcomes for the wellbeing refugee background workers.

Supportive Reporting Mechanisms: Many participants reported fear of punishment under current laws if they reported ill-treatment or work-related injuries. Developing supportive and confidential reporting mechanisms can encourage more refugees to report workplace injuries without fear of reprisal, leading to better health outcomes and safer work environments.

7.3 Mental Health Support

The study revealed significant mental health challenges faced by refugee workers due to precarious employment. Many of the participants felt chronically stressed from overworking. District health board services introduced to the refugee community may produce a beneficial solution. To safeguard the wellbeing of this vulnerable population.

7.4 Educational and Vocational Training

Another important implication is the need for educational training for refugee workers. To bypass the language barrier that researchers link to injury, there needs to be programs that bridge gaps in their knowledge and skills can enhance their employment opportunities and reduce the risk of workplace injuries. These programs should be designed with community organisations as stakeholders. This in turn will provide a necessary basis and comfortable environment that refugee workers will be familiar with. Similar, to what participants in the research who worked for a community organisation provide independently.

Chapter 8 Conclusion

This thesis has explored the diverse experiences of refugee workers in New Zealand, focusing on key themes such as identity and belonging, discrimination and lack of support, workplace challenges, adaptation and resilience, access to resources, and community engagement and empowerment. Through an in-depth analysis of these themes, we have gained a deep understanding of the unique issues faced by refugee workers and the broader implications for policy development and practice.

The findings reveal that refugee workers interviewed in the study faced significant barriers to integration, including discrimination, precarious working conditions, and lack of access to both resources and support. The overarching sense of isolation and marginalization was a shared experience, showcasing the urgent need for a targeted response and further intervention and reforms.

One of the critical findings is the impact of workplace challenges on the overall physical and mental health of the workers. The majority of the workers in the study faced physical or mental injuries stemming from their occupation. The high incidence of workplace injuries from overworking and inadequate health and safety measures highlights the need for enforcement from regulatory frameworks like Worksafe. Further domestic studies indicate that the 'Other' category, often used to assign refugee individuals, has continuously presented the highest injury rates. This calls for further examination to investigate why these demographic faces higher rates of injuries domestically and internationally. The study further emphasizes the importance of mental health support and the need for culturally sensitive services that address the unique stressors faced by refugee workers.

The themes of identity and belonging, and the experiences of discrimination and lack of support, exhibit a complex dynamic between personal identity and social integration. Refugee workers often feel the need to overcompensate to gain praise and recognition for their efforts. This can be a source of frustration and lead to chronic stress and burnout.

Addressing these issues from an employment perspective is needed. Incidences of racism recorded in the study show over half of the respondents faced some form of discrimination tied to their background. This underscores the importance of employers being trained in human resources adequate to address racism and discrimination. Further techniques like diverse hiring standards will normalize the cultural gap that many participants elaborated on.

Adaptation and resilience emerged as a significant theme, positively showing how refugee workers repurpose their existing skills into new forms of employment. This theme explored how refugees, despite their challenges, strive towards overcoming barriers like language, culture, and environment. We have seen positive narratives of how refugees who came into the country with little English have produced fruitful, successful employment, creating better outcomes for themselves. This was done working in collaboration with the refugee community, which showed the importance of the community and how they provide comprehensive translation materials and aid their own members of society by filling gaps often not addressed in the post-resettlement process.

In conclusion, this thesis presents a snapshot into the reality of the lives of refugee workers in New Zealand. By addressing these systematic challenges and promoting diversity and inclusion and fostering strong relations between the Government and the community, we can work towards successfully improving the experiences of refugee workers. This study showed the harsh reality that refugees face, often being at more risk than their native counterparts. This study serves as a building block in the realm of occupational health and safety to showcase the current outcomes that refugee workers experience and the need to address these issues through further research and government dialogue.

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Appendix

Consent form

Information sheet



Participant Consent Form

Title of Study: Exploring Perceptions, Attitudes, and Experiences towards Health, Safety, and Wellbeing among Workers of Refugee Background in New Zealand

By signing below, you indicate that:

- You have read and understood the information provided in this information sheet.
- You voluntarily agree to participate in the study.
- You understand that your participation is entirely voluntary, and you have the right to withdraw at any time up till the completion of the interviews, without providing a reason.
- You understand that your identity will remain anonymous, and your data will be stored securely.
- You give consent for the audio recording of the interview.
- You give consent for the use of de-identified data for research and publication purposes.

Participant Name: _____

Participant's Signature: _____ Date: _____

Contact Information: If you have any questions or concerns about the study or your rights as a participant, please contact the researcher, Mohamed Mohamed, at [REDACTED] and [REDACTED].

If you have any concerns about the ethical aspects of this study, you may contact Dr Ravi Reddy at R.Reddy@massey.ac.nz.

This project has been evaluated by peer review and judged to be low risk (4000027121). Consequently, it has not been reviewed by one of the University's Human Ethics Committees. The researcher(s) named in this document are responsible for the ethical conduct of this research.

If you have any concerns about the conduct of this research that you want to raise with someone other than the researcher(s), please contact Professor Craig Johnson, Director (Research Ethics). email humanethics@massey.ac.nz.



Participant Information Sheet

Title of Study: *Exploring Health, Safety, and Wellbeing: Perceptions and Experiences of Workers of Refugee Background in New Zealand*

Researcher: [Mohamed Abdulkadir Mohamed] **Supervisor:** Dr Ravi Reddy

Contact Information:

Email: [REDACTED]

Phone Number] [REDACTED]

Introduction: Thank you for your interest in participating in this research study. The purpose of this study is to gain insights into the perceptions, attitudes, and experiences regarding health, safety, and wellbeing among workers of refugee background in New Zealand. By participating in this interview, you will have the opportunity to share your valuable insights and contribute to a better understanding of the occupational health and safety needs of refugee workers.

Study Procedure: If you agree to participate, you will be invited to take part in a one-on-one semi-structured interview. The interview will be conducted in a conversational manner, allowing you to express your thoughts and experiences freely. The questions have been pre-determined however the semi-structured formats allow relevant follow up questions to be made within context. The interview will be audio-recorded to ensure accurate data collection, but your identity will remain anonymous. The duration of the interview is expected to be approximately 20 to 30 minutes. Your participation in this study is entirely voluntary. You have the right to withdraw at any time up till the completion of the interviews, without providing a reason and without any negative consequences.

Benefits of Participation: Your insights will contribute to the existing knowledge on occupational health and safety among workers of refugee background. The findings from this study may help inform policies, practices, and interventions aimed at improving the health, safety, and wellbeing of refugee workers in New Zealand.

Confidentiality and Data Protection: All information collected during the study will be treated with the utmost confidentiality. Your identity will remain anonymous in any research outputs or publications. Audio recordings will be securely stored and accessible only to the research team. Data will be stored in accordance with data protection regulations and will be retained for a period of 3 years. After this period, all data will be securely destroyed.

Ethical Considerations:

This project has been evaluated by peer review and judged to be low risk (4000027121). Consequently, it has not been reviewed by one of the University's Human Ethics Committees. The researcher(s) named in this document are responsible for the ethical conduct of this research.

If you have any concerns about the conduct of this research that you want to raise with someone other than the researcher(s), please contact Professor Craig Johnson, Director (Research Ethics), email humanethics@massey.ac.nz.

Researcher: [Mohamed Abdulkadir Mohamed]

Contact Information:

Email: [REDACTED]

Phone Number] [REDACTED]

Supervisor: Dr Ravi Reddy Ph: +64 9 2136910

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