



Bridging Refugee Youth & Children's Services

Liberian Refugees: Cultural Considerations for Social Service Providers

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Between 2003 and 2005, the U.S. Refugee Program (USRP) resettled more than 8,000 Liberian refugees in the United States. The USRP is also conducting a special resettlement effort with Liberian refugees identified as “double flight female heads of household”—vulnerable families headed by women who have fled persecution two or more times. The Liberian refugees coming to the U.S. now generally have a more rural background and have experienced war, flight and refugee camp life. Social service providers should consider these experiences as well as cultural differences between Liberia and the United States when working with Liberian refugees. The purpose of this paper is to assist social service providers by supplying background information and practice implications related to health, education, parenting, discipline, separated children, and sexuality. Additional resources on Liberian refugees and on refugee child welfare are provided throughout this paper.

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Bridging Refugee Youth and Children's Services (BRYCS), a joint project of Lutheran Immigration and Refugee Service (LIRS) and the United States Conference of Catholic Bishops (USCCB), provides national technical assistance to “bridge the gap” between public child welfare and other mainstream organizations, refugee-serving agencies, and refugee communities. BRYCS’ overarching goal is to strengthen the capacity of service organizations across the United States to ensure the successful development of refugee and newcomer children, youth, and families through targeted training, consultation, development of cutting-edge resources, and a web-based clearinghouse. Please visit <http://www.brycs.org> for more information.

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Introduction

This document is intended to be a resource for social service providers working with Liberian refugee children and families in the United States. The information provided here was gathered through a review of available literature and interviews with refugee service providers and Liberians now living in the U.S. This document is a *selective* look at Liberian culture, the impact of the civil war, and their implications for living in the U.S., focusing on topics relevant to child welfare and family life. The information here is broad and general in nature and may not capture the full diversity and experience of Liberians living in the U.S.

Background

Liberia was founded as a republic in 1847 by freed American slaves, located along Africa's Western coastline in a region that was also home to numerous indigenous tribal groups. Decades of increasing prosperity and development in the country were devastated by an on-again off-again civil war beginning in 1989. Historical goodwill between the 16 officially recognized Liberian indigenous groups was radically altered during the civil war, with ethnic divisions exploited for political and strategic gain. Liberians may distinguish themselves from one another by whether they are descendents of Americo-Liberians (the original American freed slaves), or whether they trace their heritage to one of the 16 indigenous groups traditionally located outside of the capital city of Monrovia. Some Liberians indicate Mandingos—a primarily Muslim ethnic group with ancestral ties to neighboring regions—as a distinct class or group in their society. Liberians are often conscious of last names as an indication of one's ethnic heritage.

Liberians have been in the U.S. for decades, with some coming for school, work, or to join family. In 1992, the U.S. began resettling small numbers of Liberian refugees through the U.S. Refugee Program (USRP). These numbers began to increase in 1998 due to continued instability in Liberia. Between 2003 and 2005, the USRP resettled more than 8,000 Liberian refugees who had sought refuge in the Ivory Coast but faced a new danger from the civil war heating up in this neighboring country. The USRP is also conducting a special resettlement effort with Liberian refugees identified as “double flight female heads of household”—vulnerable families headed by women who have fled persecution two or more times. This paper focuses primarily on refugees who have been resettled in the U.S. since 2003, though many comments here may also apply to Liberian refugees who have been resettled from other regions or who have been in the U.S. longer.

Like other refugee groups, Liberians with greater wealth or international connections were able to flee their country earlier than those with fewer assets and connections, who came in later waves. Those coming to the U.S. now generally have a more rural background, and have had more exposure to war, flight and refugee camp life. Liberians who have been in the U.S. for many years can be a great resource to more recent arrivals, though it is also important to recognize that many cultural and socio-economic differences may exist among Liberians.

Other characteristics of this more recent wave of Liberian refugees may include:

- A *prolonged refugee experience*, often on the run for more than a decade.
- “*Dual flight*”, meaning that they have had to flee their place of refuge two, three or more times, leading to a prolonged experience of insecurity and upheaval. Those coming out of refugee camps in the Ivory Coast may also have a sense of betrayal by those they trusted, since Liberian refugees were initially accepted in Ivory Coast and then targeted during that country's surge of violence in 2002.
- *Limited exposure to formal education*. Many adults have come originally from rural areas and many children have only attended school within a refugee camp context, which typically does not extend beyond primary schooling, if that.
- A *high number of single parent families*, headed by either men or women. Due to factors such as death, flight, instability and breakdown in societal structures, many Liberian families coming out of refugee camps have only one parent.

- *More rapid processing of refugees overseas*, due to safety and vulnerability concerns. This has led to the resettlement of some extended family units, or guardianship arrangements, in which members were reunified only briefly before resettlement and may not be used to living together.

Resources:

The following Web sites have helpful information on Liberia.

- Center for Applied Linguistics (In press). Cultural profile on Liberians. Available from the CAL Web site: http://www.culturalorientation.net/liberians/liberian_050406_1.pdf
- U.S. Committee for Refugees and Immigrants: <http://www.refugees.org/africa.aspx>
- GlobalSecurity.org, search "Liberia": <http://www.GlobalSecurity.org>

Physical and Mental Health

Liberian refugees who have experienced prolonged periods of flight and refugee camp life have typically lacked good primary health care. Since medical services have been scarce, the notion of preventive healthcare—such as immunizations, prenatal care or regular dental care—may be a foreign concept. This can result in a variety of treatable ailments that become more serious due to lack of medical care. A more detailed description of possible health issues for Liberian refugees is addressed in the report, *Background on Potential Health Issues for Liberian Refugees*, by the Office of Global Health Affairs (see the following *Practice Implications* box for this and related resources).

Lead

One recurring concern for recently arriving Liberian refugees has been high blood lead levels among children. Some resettlement workers suggest that newly arriving Liberian refugees have higher blood lead levels than other refugees. In addition, acquisition of elevated blood lead is known to occur after arrival in the U.S. Post-arrival exposure is usually from household environmental contamination by deteriorating lead paint in older housing. In addition, the malnourishment of many Liberian children makes them more susceptible to ingesting environmental lead and absorbing it into their bodies.

Practice Implications

- Newly arriving refugees should be educated about the importance and availability of preventive healthcare—seeking regular health services before a problem arises in order to avoid worse problems in the future.
- The Centers for Disease Control and Prevention (CDC) recently revised its guidelines for Blood Lead Level (BLL) testing for refugee children. See the following CDC recommendations at <http://www.cdc.gov/nceh/lead/Refugee%20Recommendations.pdf> and fact sheet summary at <http://www.cdc.gov/lead/factsheets/refugeechildrenfactsheet.htm>, as well as tips on monitoring and prevention:
 1. BLL testing of all refugee children 6 months to 16 years old at entry to the US
 2. Repeat BLL testing of all refugee children 6 months to 6 years 3 to 6 months after refugee children are placed in permanent residences and older children, if warranted, regardless of initial test results.

Resources:

- For general health issues, *Background on Potential Health Issues for Liberian Refugees*, Office of Global Health Affairs, Humanitarian and Refugee Health Affairs, U.S. Dept. of Health and Human Services: http://www.brycs.org/documents/ft_brycs0847.pdf
- Office of Refugee Resettlement (ORR) State Letter #05-07, May 25, 2005, "CDC Recommendations for Lead Poisoning Prevention in Refugee Children" : <http://www.acf.hhs.gov/programs/orr/policy/stltrs05.htm>
- CDC Assorted Materials on Lead: <http://www.cdc.gov/lead>

Trauma

The Liberian civil war has been notably damaging to civilians and the general fabric of society. Those coming out of refugee camps have most likely witnessed or experienced violence of some kind. Those who have had to flee a place of refuge more than once may be more “on guard” and may need more time to develop trust. Refugees may feel a constant sense of anxiety and guilt about relatives and friends who were left behind or whose whereabouts are unknown. Children may have become used to the language, brutality and arms of warfare, incorporating this into their play, artwork, speech and interactions with other children. Some resettlement workers report that symptoms of post-traumatic stress disorder (PTSD) begin to emerge about 8-12 months after arrival, likely as refugees are beginning to feel comfortable enough to deal with the traumas they have experienced. Some Liberians stress the importance of faith, houses of worship and Liberian religious leaders in dealing with the individual and collective trauma resulting from the civil war.

Sexual violence was a very common aspect of this conflict, often used as a weapon of war. Rape is also a common risk during flight and as part of refugee camp life. Those who have experienced sexual violence bear the mental and emotional scars of the experience, as well as possible stigma from being a rape victim. Pregnancies that resulted from rape can be a reminder of an unwanted, painful experience, and can compromise a parent’s ability to appropriately care for the resulting child.

The Liberian conflict has been widely criticized for the use and abuse, by all factions, of children as laborers and as fighters. Child soldiers have not necessarily been resettled in the U.S., but the use and abuse of children in this conflict can have a wide-reaching impact in parental loss of children to fighting; guilt over an inability to protect one’s children from danger; the breakdown of usual societal roles and standards for protecting children; and for children, a broken sense of trust that adults will protect them rather than harm them.

Practice Implications

- The Liberian war has been particularly brutal on all sectors of society. Mental health services provided with cultural sensitivity and which involve community members in developing such services, particularly elders or religious leaders, will be very important. Since mental health services may be unfamiliar to most Liberian refugees, services developed around practical or enjoyable activities may be better received.

Resources:

- ORR, together with OGHA and SAMHSA’s Refugee Mental Health Program (technical assistance provider on mental health for ORR), just published a Refugee Health Promotion & Disease Prevention Toolkit that integrates physical and mental health for refugee well-being: <http://www.refugeewellbeing.samhsa.gov/products.asp>
- For more information on children and trauma, visit the National Child Traumatic Stress Network (NCTSN) Web site at: <http://www.nctsn.org>. The NCTSN’s Refugee Trauma Task Force recently published a review of mental health interventions for refugee children: http://www.nctsn.org/nctsn_assets/pdfs/promising_practices/MH_Interventions_for_Refugee_Children.pdf
- The Association of Liberian Ministers in the USA (ALiMUSA) may be a resource in reaching out to Liberian religious leaders and institutions in the U.S.: (215) 724-1626 or <http://www.alimusa.org>
- The Web site for the Center for Victims of Torture describes numerous resources for professionals working with victims of war trauma and torture, including those working in education/ESL, employment, medicine/nursing, psychotherapy, social services and refugee community leaders: <http://www.cvt.org/main.php/BuildingHealingCommunities>

- Helping refugees to trace family members back home, or pursue family reunification, can give a sense of hope and purpose to those with loved ones left behind.

Resources:

- Refugees can receive help with tracing family members through local chapters of the American Red Cross: http://www.redcross.org/services/intl/0,1082,0_447_00.html
- Refugees can receive advice about family reunification procedures through many local refugee resettlement offices: <http://www.acf.hhs.gov/programs/orr/partners/index.htm>
- The civil war turned social mores upside down. Community members should be encouraged to develop activities that rebuild trust and cohesion among Liberians in the U.S. This may be particularly important for young people with little or no memories of life before the war.

Education

Traditionally in Liberia, an educational infrastructure existed mainly in the capital city of Monrovia, with more limited educational opportunities in the rural interior of the country. Any schooling available was severely disrupted by more than a decade of recurring fighting, as well as repeated periods of flight by those seeking refuge. It is likely that any Liberian refugee child coming to the U.S. now will have experienced multiple disruptions in their education.

Many children who have lived in refugee camps or other places of refuge for the past decade will have had limited educational exposure, though some children may have never been to school. Grade placements in the U.S. will need to account for prior academic achievement as well as age. Children may be unfamiliar with expected school behavior, such as sitting quietly, raising hands, being in co-educational settings, even using pencil and paper if children have used slates or chalkboards previously.

Many children, and parents, will be coming out of an oral tradition rather than a written tradition, and they may be more accustomed to learning by memorizing rather than problem solving or asking questions. Adjusting to a writing-based educational system may be a challenge, though an oral heritage may prove to be a strength in relation to memorization. Prior education was most likely English-based, which will also be an asset to newly arriving students.

Parents may need encouragement to become more active participants in their children's schooling, attending school conferences and meetings, checking on homework, arranging for tutoring or after-school interests – activities which were not always the norm in Liberian education, even before the war. Parents may also need help in preparing students with the necessary supplies and apparel for school. School districts and teachers receiving Liberian refugee students should also be provided cultural and country background information.

Practice Implications

- Grade placements should take into account both age and prior academic achievement.
- Children may need guidance regarding expected school behavior and may require a period of adjustment to these new rules and activities.
- Parents may need encouragement to participate in school meetings and activities, and to assist their children with homework and after-school activities. Parents may also need assistance in preparing students with the necessary school supplies and apparel.

Resources:

- The following materials were created by the Adult Learning Resource Center in Des Plaines, IL, in conjunction with the Illinois State Board of Education. The first resource introduces parents to the American school system and is available in 8 languages. The second resource targets educators seeking to involve newcomer parents in their children's schools.
 - *A Guide to Your Children's Schools: A Parent Handbook:*
<http://www.isbe.net/bilingual/htmls/ellparents.htm>
 - *Involving Immigrant and Refugee Families in their Children's Schools: Barriers, Challenges and Successful Strategies:*
http://www.isbe.state.il.us/bilingual/pdfs/involving_families.pdf
- "Stories Waiting to be Told: Refugee Students Find Their Voices" by Mary Harrison, in Teaching Tolerance Magazine (Fall 2000)
- School districts receiving Liberian refugee students should seek out background information on Liberian culture and history.

Parenting

Liberian culture has typically followed an extended family structure rather than a nuclear family structure. Though extended families have been separated by the disruption of war, extended family and community have still made up the traditional support network for parenting. In village life, as well as refugee camp life, children are typically given a fair amount of independence to run around unattended by individual parents, while attended by any adult nearby. A typical Liberian family is multi-generational; a household of two or three bedrooms might have ten people living it, making it likely that someone is always around to keep an eye on the children.

Liberian parents are used to relying on a communal network of support for raising children, which was present without intentional arrangement. American parents are used to making very intentional arrangements for the care of children and relying upon one's own nuclear family for those arrangements. By American standards, a Liberian parent who allows a child to play unsupervised may appear to be neglectful. However, the Liberian parent may be mistakenly assuming that other adults nearby will be providing supervision, since this was the way things worked back home. Working parents may need particular help with arranging after-school care.

Younger Liberian parents who have lived through the chaos of war may have had few parenting role models and may have grown accustomed to an environment where there were no "rules" for society, not to mention rules for parenting. Assumptions that may be commonplace for many American parents, such as the importance of car seats and regular bed times for children, may be strange to refugee parents and may take some time to internalize. In addition, some refugee parents may become overwhelmed by the adjustment to a new life, language and culture, as well as jobs and parenting, and may need help in balancing all of these demands in their new environment.

Some parenting methods and expectations from Liberia may be different from expectations by American parents.

- *An assumption of shared parenting duties by anyone else in the community.* An example of this conflicting with American practice is when Liberian families arranged for other community

members to pick up a child from school, though they were not on an approved list of people who could retrieve the child. This indicates a strength in relying on other community members for support, but may appear to school personnel as haphazard or unpredictable parenting. Liberian parents, in turn, may find it strange to have such a rigid system for picking up children.

- *Parenting duties shared by older children in a household.* It is common in Liberia for older children, particularly girls, to assist with the care of younger siblings. This practice is partly out of necessity, due to less prevalence of daycare and out-of-home childcare arrangements, and partly an indication of the expectation that children will assist in the chores and running of the household. Children age 10, or even younger, might be left with the care of an infant. This may be viewed as neglectful by U.S. standards, while a Liberian parent might view this as commonplace.
- *Sending children to live with other relatives or friends.* The assumption of shared parenting may include sending a child to live with another relative or community member, even in another city or state, for purposes of education, more space or resources, trying to control a child's behavior, or to allow a parent to take a trip. This practice may be viewed as a lack of bonding or appropriate concern about the child by American standards, while Liberians may view this as showing the utmost concern about a child so that they have access to some kind of opportunity, or can get to know other relatives. This practice also reflects a difference in perspective about the place of children within the family hierarchy: in American families, children's needs are often the center of attention, while in Liberian families, the needs of adults take priority over children's needs, which also teaches children the value of respecting their elders.

As with most refugee and immigrant groups, children typically acculturate more rapidly than their parents, and sometimes to the dismay of their parents. This can cause tension between parents and children, particularly during adolescence as children try to develop more independence and strive to "fit in" with their peers. Activities that help strengthen parent-child bonds and communication can be helpful, along with programming which helps teens take pride in their dual Liberian-American culture.

Practice Implications

- Heads-of-household should be educated about U.S. laws and expectations regarding childcare, as well as typical childcare services in the community.
- Older teens should be included in parenting education, if appropriate.
- Proactively share information about U.S. guardianship expectations so that families can make suitable, legal arrangements before a crisis arises.

Resource:

- *BRYCS Guardianship Fact Sheet:* <http://www.brycs.org/documents/GSHPFACT.PDF>

- Incorporate childcare planning into job search strategies.
- Where possible, involve established Liberian families for mentoring of newly arrived families and for modeling parenting practices in the U.S.
- Encourage activities that help strengthen parent-child bonds and communication, such as regular family meals, family-centered outings or mother-daughter/father-son activities.
- Recruit mentors for refugee teens, to help them distinguish between positive and negative aspects of American culture, and to help them integrate aspects of both their original culture and their new culture.
- Develop parent support and education classes to address the specific needs and interests of refugee parents.

Resource:

- *BRYCS Parenting Manual Strengthening Services for Refugee Parents: Guidelines and Resources:* http://www.brycs.org/documents/parenting_manual.pdf

- *Good practice example:* Staff from Refugee Services of Texas (Austin) and Family Forward worked together to modify an existing parenting curriculum to specifically meet the needs of Liberian refugees. Prior emphasis on written responses was changed to involve role-plays; description of U.S. child welfare systems was included, along with practical guidance on childcare arrangements and behavior management techniques. For more information, e-mail: rstau@sbcglobal.net.

Discipline

Liberians have traditionally followed the Biblical adage, “Spare the rod, spoil the child,” (meaning if you do not discipline a child, you will spoil the child.) Physical forms of discipline, while typically frowned upon within current American society, are common in Liberian culture and are viewed as necessary to prepare a child to be a good citizen. Corporal punishment is an accepted, even expected, form of discipline for children, and is seen as an indication of good parenting. A rattan switch, or belt, might be typical items used to punish a child, often called “beating”. A beating that leaves a mark on a child is not necessarily considered excessive, as it would be by child welfare standards in the U.S. Any adult may discipline a child, including teachers, relatives, and neighbors. Those who do not physically discipline their children are likely to be viewed as spoiling their children. Discipline may also include a harsh tone and verbal reprimands toward a child, which may be considered verbal abuse by some Americans. The notion of a government entity, such as the U.S. child protective service (CPS) system, monitoring child welfare and having the authority to remove children from their family is quite foreign to Liberians.

Another traditional form of discipline, which would conflict with American child rearing standards, is the use of ground hot peppers to punish a child. This is reportedly an ancient practice used primarily by the Kru, Bassa and Grebo ethnic groups and may be less prevalent among those with higher educational background. Hot peppers are ground up and made into a powder or paste. This is then applied to sensitive orifices, primarily the eyes or genitals, and may include putting the child outside in the sun to intensify the pain. While very painful, it is thought that this pain will ensure that a child does not misbehave again. In Liberia, the hot pepper was ground using a mortar and pestle, which would not fully grind the seeds, the hottest part of the pepper. In the U.S., blenders are typically used to grind peppers, a common ingredient in Liberian food. If parents use peppering as punishment, this technical change from pestle to blender may unintentionally make the practice of peppering more painful since a blender will grind up more of the seeds. Other medicinal uses for ground peppers can include placing them on the lips of a pregnant woman during labor to help with the pain, or placing a mixture of peppers and spices in a baby’s nostrils, usually during the first weeks of life, in order to make a baby healthy and strong.

While the discipline methods described here were common prior to the war in Liberia, it is possible that the disruption of war and flight has also changed discipline practices. Some families may resort to the discipline practices used on them as children, while other families may provide minimal discipline and guidance to children due to the disruptions, separations, traumas, and despair of refugee life.

Practice Implications

- Liberian refugee parents should be informed of child welfare standards in the U.S., the role of CPS, and what happens if children call 911 to report their parents for abuse.
- Resources:*
- For a general overview of the child welfare system, see *How Does the Child Welfare System Work*, by the National Clearinghouse on Child Abuse and Neglect Information: <http://nccanch.acf.hhs.gov/pubs/factsheets/cpswork.pdf>

- For a more in-depth look at the child welfare system, see *A Family's Guide to the Child Welfare System*, by the Child Welfare League of America (CWLA): <http://www.cwla.org/childwelfare/familyguide.htm>
 - To find child welfare statutes in a particular state, go to: <http://nccanch.acf.hhs.gov/general/legal/statutes/search>
- Parents should be informed that punishment that leaves a mark and the use of painful punishments such as hot peppers are likely to be viewed as abusive by U.S. standards.
 - Information about non-physical means of discipline should be provided (such as the use of “time outs” and “grounding”), so that parents have alternative tools in disciplining children.
 - Helping parents distinguish between discipline (guiding a child towards changed behavior), and punishment (retribution for a child’s misdeed), may also be helpful.
 - Parents should be encouraged to continue providing guidance and discipline to their children using methods considered acceptable in their new country.

Separated Children

The Liberian civil war has created a large number of separated children—children who became separated from their biological parents—due to factors such as the high level of violence and killing, separation as a consequence of flight, the practice of sending children elsewhere for safety, and the forced conscription of children for labor and fighting.

Liberians have a history and tradition of caring for the children of others—whether relatives, friends or strangers. Some trace this practice back to the country’s founding by “Americo-Liberians”, who governed the country and would commonly bring children from the rural interior areas into the capital city of Monrovia, where they provided household labor in exchange for education and sustenance. The practice of taking in other children continues today. In Liberia, a household consisting of only a nuclear family would be an unusual occurrence and would be viewed as “selfish” for not helping to care for those with lesser means.

The ease with which Liberian families continue to take in and care for children is admirable and has been a source of support for the many children separated from parents. Though the notion of foster care as a government institution is a foreign concept, the practice of foster care in Liberian culture occurs fairly spontaneously. This should be viewed as an opportunity for communities with significant Liberian populations to reach out to Liberian families in order to become licensed foster families.

While this practice is a strength, it can also be a risk factor for children who are more distantly related or unrelated to caregivers. As in most other cultures, the closer the blood relationship between child and caregiver, the more familial is the treatment; alternatively, the more distant the relationship, the less familial is the treatment. Children who are not the biological children in a family—particularly those who are distantly related; cared for by siblings who are close in age or have limited parenting experience; those related by marriage rather than by blood; and those who have no blood relationship—should receive more careful monitoring to ensure appropriate care. Some refugee families may approach the care of a separated child with the best intentions, but may find the realities of caring for an additional child more than they can manage. Other families may expect an unrelated child to carry a larger burden of household labor or to provide childcare, which is sometimes the practice in Liberia.

Refugee service workers, as well as refugee families themselves, may have difficulty explaining precisely how everyone in a family is related, or may describe relationships that are not exactly accurate by bloodline. This is not necessarily an effort to mislead, but rather a reflection of the cultural openness to taking in other people’s children and the sincere belief that the children have become a part of the family. Americans might view this as lying, strictly speaking, whereas a Liberian might not view this as lying since they truly believe the child taken in has become their child—and, culturally speaking, the child has. A child taken in by another family in Liberia typically takes on the name of the “adoptive” family, though usually no paperwork or legal process is completed. Sometimes this name change can be an incentive

for a child to go live with another family and take on the family name, since the last names of Americo-Liberians are viewed by some as having higher social status.

Some children became separated from parents or extended family during the war and have since been able to reunite in the United States. Common challenges upon reunification can include:

- *Infantilizing the child*, that is, treating the child as if he/she is still the age when they were separated, despite the passage of time;
- *A lack of bonding* between parent and child, since the parent has missed many developmental milestones in the child's life;
- *The child feeling angry and abandoned*, which can lead to tension with parents and behavioral issues.

Resettlement with parents or relatives is the preferred option for refugee children. However, when this is not possible, or when relatives are unable to provide a child with appropriate care, a specialized network of refugee foster care programs exists to care for children in a culturally sensitive manner. ORR coordinates this network through a public-private partnership with Lutheran Immigration and Refugee Service and the U.S. Conference of Catholic Bishops.

Practice Implications

- Liberian families are accustomed to fostering children, though they are unaccustomed to the involvement of the state in this practice. This openness to care for the children of others could make them a resource to the domestic foster care system.
Resource:
 - The BRYCS document, *Serving Foreign-Born Foster Children: A Resource for Meeting the Special Needs of Refugee Youth and Children*, can be a resource in recruiting refugee families as foster families, as well as a resource for foster care agencies serving foreign-born children in foster care: <http://www.brycs.org/documents/fostercare.pdf>
- Families caring for separated children should receive kinship care support services, where available.
Resource:
 - State fact sheets describing kinship care laws, policies and resources in each state are available at the Web site of the Child Welfare League of America: <http://www.cwla.org/programs/kinship/factsheet.htm>
- Separated children should receive careful preparation before arrival and additional monitoring after resettlement, particularly those with looser bonds to their caregivers. Children reunified with parents after long periods of separation should also receive extra monitoring.
Resources:
 - BRYCS document *Suitability Assessment Tips: Safeguarding Refugee Children Who Arrive Without Parents*: <http://www.brycs.org/documents/SAT-BA~1.PDF>
 - BRYCS document *Separated Refugee Children in the United States: Challenges and Opportunities*: http://www.brycs.org/documents/separated_children.pdf
- Refugee children who cannot be cared for by relatives may be eligible for specialized refugee foster care programs funded by ORR.
Resource:
 - For more information on these services see the description, *The Unaccompanied Refugee Minor Program of the U.S. Refugee Program*: <http://www.brycs.org/documents/URMdescOnly-rev7-04.pdf>

Sexuality

Prior to the war, many Liberians considered sex before marriage taboo. One apparent impact of the war and the prevalence of rape has been a desensitization towards sex and its prior sacredness. Sex also became a tool of commerce and survival for some refugees with no other means of support. Some

refugees who faced employment prohibitions or high unemployment rates in their countries of refuge may have turned to prostitution in order to survive. Other Liberians report that some girls developed “sugar daddies”, whether willingly or unwillingly, who were typically government employees or aid workers that engaged in relationships with young girls in return for financial support of the girl’s family. In a UNHCR report about similar exploitative practices with refugees in Guinea, Liberia and Sierra Leone, it was noted that the children most at risk for sexual exploitation were those, “without the care of their parents, children in child-headed households, orphaned children, children in foster care, children living with extended family members and children living with just one parent.”¹ Refugees who have gone through such experiences may have an increased vulnerability to further sexual exploitation, even after resettlement. They may also have strained relationships with family members due to feelings of guilt, shame, anger, changed sexual behavior, or changed family roles if a youth served as the primary breadwinner in a household.

Many Liberians will be comfortable with the idea of a man having more than one wife, though the same freedom is not expected of women. Traditionally, some ethnic groups, particularly Muslims, have been polygamous (a man having more than one wife). Polygamy has been legal in the Liberian countryside, though the former President Charles Taylor tried to also legalize polygamy in Monrovia and encouraged men to have more than one wife. In current practice, Liberian men may have girlfriends in addition to their wives. This practice is believed by some Liberians to be extremely common. Refugees will have been informed prior to resettlement that polygamy is against the law in the United States.

In certain ways, Liberians may seem more Westernized or liberal in their sexual practices than some other refugee groups. However, they may have had very little exposure to sex education and limited information about sexually transmitted diseases. Sexuality is viewed as a normal part of life, perhaps due in part to the realities of living in small homes with little privacy, particularly during flight and refugee camp life. Early exposure to and openness about sexuality may result in early sexual activity by youth.

Practice Implications

- Talk with Liberian families about American expectations in relationships and legal obligations in parenting, such as child support.

Resources:

- The federal Office of Child Support Enforcement includes links to State Web sites on child support: <http://www.acf.dhhs.gov/programs/cse/extinf.htm>
 - For example, the New York State Division of Child Support Enforcement has a brochure on *What Non-Custodial Parents Need to Know About Child Support*: <http://www.newyorkchildsupport.com/pdfs/ChildSupportpagesAll.pdf>

- Address healthy dating and sex education with adults, teens and pre-teens.

Resources:

- The Centers for Disease Control and Prevention (CDC) at <http://www.cdc.gov> and the Office of Global Health Affairs (OGHA) at <http://www.globalhealth.gov/> provide information on these issues for the Office of Refugee Resettlement (ORR). The OGHA Web site, as its name implies, offers information on health for populations around the world.
- The CDC Web site also includes links to state and local health department Web sites for more information.
 - For example, the Minnesota Department of Health Web site includes a page devoted to “Refugee Health,” <http://www.health.state.mn.us/divs/idepc/refugee/index.html>

¹ UNHCR and Save the Children UK (2002, February). *Note for Implementing and Operational Partners by UNHCR and Save the Children-UK on Sexual Violence and Exploitation: The Experience of Refugee Children in Guinea, Liberia and Sierra Leone based on Initial Findings and Recommendations from Assessment Mission 22 Oct – 30 Nov 2001* (p. 4). Retrieved from: www.unhcr.ch

- Educate men and women about U.S. laws regarding statutory rape (sex between an adult and a minor) and date rape (when a partner does not take “no” for an answer), including the real possibilities of jail time and deportation for convictions.

Resource:

- For information on laws governing sexual contact, see: <http://www.sexlaws.org>

Transition to Adulthood

In traditional Liberian society, girls and boys undergo certain rituals as a passage from childhood into adulthood. The ritual for girls involved initiation into the “Sande Society,” while boys were initiated into the “Poro Society.” Most Liberians will be reluctant to discuss these secret societies, since talking about them is taboo and mystical beliefs surround the practices. Initiation rites might include scarification or tattoos, often having some relation to the young person’s tribal or ethnic heritage. Traditionally, female circumcision (also known as “female genital mutilation” or “female genital cutting”) was part of this ritual for many girls, particularly those raised outside of Monrovia, with estimates ranging from 50% - 95% participation. However, this practice appears to be decreasing since the conflict. This practice typically has several reasons for continuation: tradition, a rite of passage marking a girl’s transition from childhood to womanhood, a means of controlling female sexuality by ensuring virginity before marriage, and limiting female enjoyment of sex to ensure fidelity. Liberians in the U.S. note that this practice was more common in rural areas and among those with less education.

There is some speculation that the practice of female circumcision has been disrupted by the war and is occurring at a much lower rate than before the conflict. Refugees resettled in the U.S. will have been informed that the practice of female circumcision is illegal in the U.S. (though it may also be important to assure refugees who have already undergone this that being a circumcised person is not illegal in the U.S., so that they do not hesitate to get preventive and needed medical care).

Practice Implications

- Liberian refugee communities may have an interest in developing an alternate rite of passage which would be more acceptable in the U.S. while marking the transition from girlhood to womanhood (or boyhood to manhood). Refugees who underwent female circumcision prior to resettlement in the U.S. should be encouraged to receive gynecological exams, since this procedure can sometimes have lasting painful consequences or can be problematic during childbirth.

Additional BRYCS Resources

The following “Monthly Spotlight” articles and “Featured Searches” from the BRYCS Web site provide additional resource materials relevant to topics discussed in this paper. They are located at <http://www.brycs.org> under “Monthly Archive.”

- May 2005, “World Refugee Day”, featuring Meskhetian Turks and Burmese refugees
- April 2005, “Refugee Children Without Their Parents: Guardianship, Kinship Care and Foster Care”
- March 2005, “Serving Children with Little or No Previous Former Schooling”
- February 2005, “Developing Culturally Competent, Effective Parenting Programs”
- December 2004, “Home Based Child Care: Not ‘Child’s Play’”
- November 2004, “Child Development: Challenges Across Cultures”
- September 2004, “Separated Children: Challenges and Opportunities”
- August 2004, “Getting Ready for School: Educational Resources for Refugee Children, Youth and Families”
- July 2004, “Health Care Issues for Refugee Children, Youth and Families”
- February 2004, “Helping Refugee Parents Adjust to Life in the U.S.”
- January 2004, “Mental Health Issues and Refugee Youth and Children”

Additional resources are available on the BRYCS publications page at

http://www.brycs.org/brycs_resources.htm.

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