THINKING OUTSIDE THE (CLINICAL) BOX: ERITREAN REFUGEE'S INFORMAL FORMS OF SUPPORT AND HEALING

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Background: Eritrea, one of the most suppressive dictatorships in the world, is currently one of the top source countries of refugees (UN, 2016), with approximately 26,500 residing in Israel (PIBA, 2020). Despite the substantial burden of mental illness within this population, epidemiological studies have consistently found that refugees residing in Israel rarely access and use mental health services (Kiat et al., 2017).

Aims: 1) To identify Eritrean refugees local healing practices and mental health supports
2) To explore the various beliefs, processes of healing and functions of informal care, practiced by family, friends, natural helpers and religious leaders, in the prevention and alleviation of psychological distress

Methods: Data collection in Israel was conducted over a six-month period (Nov. 2019 - May 2020) and included 200 hours of participant observation, in-depth interviews with Eritrean refugees suffering from psychological distress (n=26), and key informant (KI) interviews with religious and community leaders as well as Eritrean cultural mediators working in health clinics (n=9).

Results: Traditional and faith-based healing practices as well as family and peer-support emerged as the most prominent strategies. These included: private and public religious practices; sending back individuals suffering from severe mental health symptoms to Eritrea for traditional treatment in Maychelot (holy water sights); folk healing in cases of Buda (evil eye), and refugee-led community initiatives. At the same time, interviews suggest that Eritrean refugees' beliefs and practices were not static nor isolated from other approaches to mental health. Rather, they were constantly being redefined and reconstructed, in a dynamic process that encompasses a complex mix of knowledge replication, loss, addition, and transformation.

Implications. The findings suggest that re-imagining service delivery and cooperating with refugees' non-traditional support systems can help overcome some of the major barriers that currently impede refugees from receiving mental health care.

Learning Objectives
At the conclusion of this presentation, participants will be able to:
1. Describe at least 3 informal sources of healing and support employed by Eritrean refugees.
2. Explain the importance of adapting formal (Western) interventions and services so they account for refugee communities' beliefs and practices and support their local modes of coping, strength, and resilience.