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THE SCHOOL OF HUMAN AND COMMUNITY DEVELOPMENT (SHCD)



Exploring the role of forgiveness on mental wellbeing interventions among Congolese refugees in Yeoville, Johannesburg.

A report on a study project presented to
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By

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ABSTRACT

The ongoing political violence in the Democratic Republic of Congo (DRC) has exposed female Congolese to traumatic events and adverse situations such as sexual violence, genocide, torture, political persecution, and the loss of loved ones, which have made them to leave their country. These traumatizing experiences negatively affect the mental wellbeing of Congolese. The purpose of this study was to explore the role of forgiveness on mental wellbeing interventions among Congolese refugees and asylum seekers. The study employed a qualitative research method and a descriptive case study of ten female Congolese refugees living in Yeoville, Johannesburg South Africa. The participants have lived in South Africa for less than 5 years and were 30-40 years of age. Data was collected by means of one-on-one in-depth interviews in the form of semi-structured interviews. Purposive sampling and snowball sampling techniques were used in the selection of participants. Thematic content analysis was used in analysing the data collected. The findings of the study revealed that forgiveness plays an important role on mental wellbeing interventions. Forgiveness results in improved mental wellbeing with reduced anger, anxiety, depression, stress and rumination. Participants who have forgiven the state forces and rebels reported that their mental wellbeing improved when they considered forgiving. This shows that there is a need to incorporate forgiveness in mental wellbeing interventions among Congolese refugees and asylum seekers. The study provides recommendations on how social workers can incorporate forgiveness in mental wellbeing interventions. This study also contributes to a better understanding of mental wellbeing issues of Congolese refugees and asylum seekers as well as their survival strategies and challenges they face in South Africa.

Key words: refugees, asylum seekers, forgiveness, mental wellbeing, mental wellbeing interventions.

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CHAPTER ONE

INTRODUCTION TO THE STUDY

1.1. Introduction

Unforgiveness raises a serious concern as a public health problem within the South African context and across the world with people being victimised in their lifetime. Individuals that experiences trauma from war or conflicts can harbour chronic unforgiving emotions towards other people, which is a potential mental wellbeing concern (Ingleby, 2007). Although many interventions or methods exist by which victims of war or conflicts may alleviate their distress, forgiveness is recommended as a healing process that could promote good mental wellbeing among individuals, groups or communities. South Africa being a choice destination for refugees from sub-Saharan Africa, it is important to consider the mental wellbeing interventions that improve the psychological wellbeing of refugees and asylum seekers. This study therefore has explored the role of forgiveness in promoting mental wellbeing among 10 female Congolese refugees living in Yeoville, Johannesburg, South Africa.

1.2. Problem statement and rationale for the study

Studies on forgiveness report a positive relationship between forgiveness and mental wellbeing (Griffin, Worthington, Lavelock, Wade, & Hoyt, 2015). Baskin and Enright (2004) defined forgiveness as the wilful giving up of resentment in the face of another's (or other's) considerable injustice and responding with beneficence to the offender even though the offender has no right to the forgiver's moral goodness. However, there is little research that has been conducted on forgiveness in relation to mental wellbeing issues among Congolese refugees in South Africa. According to data supplied by United Nations High Commissioner for Refugees (UNHCR), South Africa is a home to the highest number of refugees in the world with more than 3, 2 million refugees displaced in 2015 alone due to political conflicts in their country of origin. People died in the 1998 outbreak of fighting in the Democratic Republic of Congo (DRC) that it was labelled the world's deadliest conflict since World War II (Hughes, Joshi, Jonathan , Sisk, & Solorzano, 2015). This has provided the researcher with an opportunity to find out how forgiveness on an interpersonal level influences mental wellbeing of Congolese refugees in South Africa that were displaced due to this outbreak of fighting.

According to Hughes et al. (2015) common mental health diagnoses associated with refugee populations include post-traumatic stress disorder (PTSD), major depression, generalized

anxiety, panic attacks, adjustment disorder, and somatization. This shows that the mental wellbeing of refugees is highly affected due to experiences of traumatic events and adverse situations such as sexual violence, genocide, torture, political persecution, and the loss of loved ones, which have made them to leave their country of origin. This research study therefore provides an addition to current literature on how forgiveness aids in the effectiveness of mental wellbeing interventions on immigrants that were displaced from their country of origin due to political conflicts. According to Ingleby (2007), outcomes of political conflicts especially massacres or the killings of civilians can be traumatising and this causes posttraumatic health and mental wellbeing problems on individuals. Forgiveness is assumed to contribute to healing post-trauma negative health and mental wellbeing consequences (Kira, et al., 2009). This study however, is concerned with the extent to which mental wellbeing interventions can be effective by incorporating forgiveness among Congolese refugees living in the Yeoville area. Attention has mainly been on how xenophobic attacks have impacted refugees and asylum seekers' mental wellbeing but there is less effort invested in exploring how people from the Central African region has managed to forgive armed groups killing civilians in the region and how this has impacted on their mental being. This study add to existing literature on previous and similar research done on this topic. This study also contribute to the field of social work especially in the provision of social work services to refugees and understanding the relationship between mental wellbeing and forgiveness.

1.3. Contextualization of the study

South Africa being a choice destination for refugees from sub-Saharan Africa, it is important to consider the mental wellbeing interventions that improve the psychological wellbeing of refugees and asylum seekers. This research study will have an impact in educating and alerting mental health service providers and the government about the need to promote the mental wellbeing of refugees and asylum seekers through incorporating forgiveness in South Africa. This study demonstrates the role of forgiveness on mental wellbeing interventions among refugees and asylum seekers. This study also contribute to the field of social work especially on how social workers can incorporate forgiveness in mental wellbeing interventions among victims of trauma. There is a gap in literature on the mental wellbeing interventions that are available to refugees and asylum seekers in South Africa therefore more studies need to be done on this field.

1.4. The current study and its objectives

Research question

Does forgiveness play a role on mental wellbeing interventions among Congolese refugees and asylum seekers in Yeoville?

Primary aim

To explore the role of forgiveness on mental wellbeing interventions among Congolese refugees and asylum seekers in Yeoville.

Secondary objectives

- To explore the factors that contributed to Congolese refugees and asylum seekers migrating out of Congo.
- To explore Congolese refugees and asylum seekers' survival strategies in South Africa.
- To establish the role of a social worker in forgiveness and mental wellbeing among immigrants.

1.5. Structure of the study

This research report consist of six chapters. The first chapter is the introduction which includes a detailed description of the problem statement, the aim and objectives of the study. Chapter two is the literature review which include recent relevant literature that has been reviewed in order to enhance the current study with necessary concepts and ideas. Chapter two also include theoretical frameworks that serves as a guide and support the study. Chapter three is the methodology, it explains all the procedures undertaken to conduct this research. This include research instrument used, sampling, data collection, and data analysis method and research ethics of this study. Chapter four provides a description and analysis of the research findings that forms the fundamental substance of this research study. Chapter five is the discussion, which is an analysis of the major findings of this study in relation to the findings of previous studies in order to better understand the role forgiveness on mental wellbeing. Finally, chapter six has concluding remarks with recommendations and possibilities for further research.

CHAPTER TWO

LITERATURE REVIEW

2.1. Introduction

This chapter will review the theoretical context and theoretical frameworks on the association between forgiveness and mental wellbeing. This chapter will begin by defining the key concepts followed by the theoretical context. The theoretical context will portray the literature on some factors that affect the individual's willing to forgive. The researcher will further discuss about the role of forgiveness in post-conflict recovery and the need to promote forgiveness as a mental wellbeing intervention. Attention will also be turned to the mental wellbeing of refugees and asylum seekers in South Africa as well as mental health interventions available to this population. Finally, this chapter will conclude by discussing theoretical frameworks which include a number of models that have been developed to demonstrate the role of forgiveness on mental wellbeing.

2.2. Definition of key concepts

Refugee

The 1998 Refugees Act defines a person as a refugee if they have “a well-founded fear of being persecuted” for reasons of race, religion, ethnicity, nationality, political beliefs or being members of a particular social group, and have fled their home country for safety in another country due to threats on account of external aggression, foreign occupation or domination, or other events disturbing or disrupting public order in their native country.

A refugee also refers to a person who has been granted asylum status and protection in terms of the section 24 of Refugee Act No 130 of 1998.

Asylum seeker

The Refugee Act of 1998 defines an asylum seeker as a person who has fled his or her country of origin and is seeking recognition and protection as a refugee in the Republic of South Africa, and whose application is still under consideration.

Forgiveness

It is defined as the wilful giving up of resentment in the face of another's (or other's) considerable injustice and responding with beneficence to the offender even though the offender has no right to the forgiver's moral goodness (Baskin & Enright, 2004). Forgiveness involves a cognitive, emotional, and behavioural response to interpersonal conflict.

Mental wellbeing

The World Health Organization (WHO) has defined mental wellbeing as a “mental state in which every individual realizes his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community” (WHO, 2018).

Mental wellbeing interventions

These are preventive and promotional strategies to mental wellbeing that affect the functioning of the individual (WHO, 2018).

2.3. Theoretical context

Interpersonal forgiveness and mental wellbeing

Over the past two decades, a number of reviews have examined the association between interpersonal forgiveness and mental wellbeing (Lawler, et al., 2005). These researchers concluded that interpersonal forgiveness is positively associated with mental wellbeing. However, there is no single definition of interpersonal forgiveness and different theorists measure it in different ways. According to Maynard, Piferi and Jobe (2016) interpersonal forgiveness refers to a cognitive, emotional, and behavioural response to interpersonal conflict. Baskin and Enright (2004) defined interpersonal forgiveness as the wilful giving up of resentment in the face of another's (or other's) considerable injustice and responding with beneficence to the offender even though the offender has no right to the forgiver's moral goodness. Although there is no universally accepted definition of forgiveness that exists, many theorists generally emphasise that interpersonal forgiveness involves not only a reduction of unforgiving negative emotions, but also an increase in positive prosocial emotions toward someone who does not necessarily deserve it (Weinberg, et al., 2017).

Researchers who have studied forgiveness have used many theoretical understandings of this construct and most of them agree that interpersonal forgiveness is complex. Research has shown that interpersonal forgiveness involves cognitive, affective, motivational, decisional and interpersonal aspects (Wade, Hoyt, Kidwell, & Worthington , 2014). However, researchers do not agree about which of these aspects is the most important. According to Worthington et al. (2016) there are two types of interpersonal forgiveness that exist which are decisional and emotional forgiveness. In Worthington's proposal decisional forgiveness is a behavioural intention statement that an individual or a group of people seek to behave towards the transgressor. In addition to this definition one might grant decisional forgiveness but still be emotionally upset, cognitively oriented towards anger, anxious, depressive and motivationally oriented revenge or avoidance (Worthington, et al., 2016). This shows that decisional forgiveness can trigger emotional forgiveness in some cases.

The second type of forgiveness is emotional forgiveness. On this aspect Worthington and colleagues argued that forgiveness is rooted in emotions which affect people's motivations (Worthington, et al., 2016). Research has demonstrated that people who are offended or hurt experience an injustice gap which involves the way in which one would want a transgression to be fully resolved and the way they perceive the situation currently (Worthington & Aten, 2010). The magnitude of the injustice gap is found to be inversely proportional to forgiveness leading to delayed negative emotions toward a person who has transgressed personal boundaries. The delayed negative emotions include anger, fear and anxiety. Worthington and Aten (2010) argued that these negative emotions lead to stress and other stressful reactions resulting poor mental wellbeing.

Research that has been done on forgiveness shows its reciprocal relationship to hostility, anger, anxiety and depression which affect the mental wellbeing of a person (Athwaria & Srivastava, 2016). According to these authors forgiveness involves letting go of negative affect and the literature has supported it with documentation of the association of negative emotions such as anger and depression. Forgiveness is found to actively reduce or shorten the duration of these negative emotional states and one would expect this to be associated with better wellbeing. A study that was done by Lawler et al. (2005) shows that having a forgiving personality reduces the negative affect and improves mental wellbeing by maintaining social harmony in the face of interpersonal conflict and by reducing the experience and impact of stress.

Looking at forgiveness and mental wellbeing, research has linked difficulty forgiving with poor mental wellbeing. Forgiveness often improves mental wellbeing by reducing depression, anxiety, anger, rumination, obsession, and stress (Toussaint, Worthington, & Williams, 2015). According to the study that was done by Witvliet, Phipps, Feldman and Beckham (2004) it was found that there is a significant association between dispositional difficulty towards forgiving others and difficulty towards forgiving oneself with mental wellbeing among military veterans with Post Traumatic Stress Disorder (PTSD). Several studies have shown a positive effect of forgiveness on self-reported health, hypertension, chronic pain, addiction and Post Traumatic Stress Disorder (Baetz & Toews, 2009). Also data produced by the Truth and Reconciliation Commission in South Africa shows that depression, PTSD, and other psychiatric disorders are higher among individuals who demonstrate less forgiveness years after the events (Baetz & Toews, 2009).

Societal issues and interpersonal forgiveness

Research findings have also shown that there are societal issues involving interpersonal forgiveness. After intense violence between groups in societies people (victims) are less ready to forgive (Worthington, 2015). Research that was done in Rwanda by Staub (2013) found that interpersonal forgiveness after genocide or mass killings is difficult. After more severe experiences with violence, individuals are less ready to forgive. In the Northern Ireland, people who experienced more violence in the 1972 genocide are less willing to forgive the other political group that was killing their ethnic group (Worthington, 2015). Literature suggests that in instances like genocides, the other party has a role in forgiveness by apologising or asking for forgiveness (Staub, 2013). However, other studies reports that forgiveness can be one sided-a change in the victims (Maynard, Piferi, & Jobe, 2016).

Religion and interpersonal forgiveness

Religion has been found to be playing an important role when it comes to forgiveness (Worthington, 2015). According to studies on religion and forgiveness, religiousness has been assumed to promote forgiveness. A research that was done in Rwanda found out that in the Christian community and predominantly Catholic, forgiveness is as deeply held value (Staub, 2013). This study shows that in Rwanda many people who work to promote reconciliation after the genocide have strong religious beliefs. However this is not the case in the Northern Ireland, there religion was the basis of conflict and religious authorities often supported violence (Worthington, 2015). The contradictions of research findings on forgiveness in relation to

religion shows that religiousness may sometimes not contribute to and may even inhibit forgiveness when perpetrators are members of another religious group.

The costs and benefits of interpersonal forgiveness on an individual

Research indicates that there are benefits of forgiveness after mass violence. According to Staub (2013), forgiveness helps the victims relieve the pain and distress of those who have been harmed, injured or victimised by other people. Forgiveness results in more positive mental states not dominated by negative thoughts and resentment (Worthington, 2015). It also results in improved emotional states with less anger, anxiety, depression and guilt.

Most of the research that has been done on forgiveness assumed that interpersonal forgiveness is beneficial, however it was also found that forgiveness can clearly be costly for individuals to undertake (Worthington & Cowden, 2017). Interpersonal forgiveness is seen as a response to injustice gap. Research has shown that people who forgive often think they are giving up rights to retaliate or seek legitimate justice (Worthington & Cowden, 2017). Thus it can be difficult for people who express forgiveness. In addition, there may be limits to what people can forgive. Some authors have found out that almost any act can be forgiven and others suggest that forgiveness is limited by the attitude of the transgressor (Staub, 2013). It is argued that people would not grant forgiveness if the transgressors do not take responsibility for their actions or when they continue to perpetrate harmful acts.

Interpersonal forgiveness and demographic variables (age and gender)

Studies related to forgiveness and demographic variables found out that age and gender are related to interpersonal forgiveness. According to a study that was done on the relationship between age, justice and forgiveness, it was found that the reasoning of adolescents differed from adults and children, paralleling developmental theory (Orathinkal, Vansteenwegen, & Burggraeve, 2008). It was found out that the propensity to forgive increases from adolescence to old age because when people grow older, there is a slight increase in the disposition to be more forgiving. This shows that elderly individuals are more likely to forgive than young adults. Prior research findings on age difference in forgiveness demonstrate an increase in the willingness to forgive in elderly people compared to young adults (Allemand 2008; Steiner, Allemand & McCullough 2012; Girard and Mullet 1997; Mullet and Girard 2000; Subkoviak et al. 1995; Toussaint et al., 2001).

Previous research has demonstrated inconsistent results when it comes to the relationship between gender and interpersonal forgiveness (Orathinkal, Vansteenwegen, & Burggraeve, 2008). Some studies did not find any gender differences in respect to interpersonal forgiveness. Yao and Enright (2018) suggested that there is no difference between men and women with respect to forgiveness. Conversely, Hanson also argues that men are more likely to forgive than women. One of the recent studies done have shown that men are less forgiving than women (Orathinkal et al., 2008). In contrast, a recent meta-analytic review demonstrated that on average women are more forgiving than men. These gender differences are because it was found out that men have a greater tendency to harbor thoughts of revenge when recalling past anger provoking experiences than women (Ghaemmaghami, Allemand, & Martin, 2011).

Post-conflict recovery and forgiveness

A study that was done by Doran, Toussaint, Kalayjia and DeMucci (2012) in post-conflict Sierra Leone indicates interpersonal forgiveness is related to improved adjustment to trauma. However, both gender and age played an important role regarding the levels of trauma and interpersonal forgiveness. Older participants reported higher levels of forgiving behaviours than young adults and forgiveness was more strongly connected to traumatic stress for older people than young adults. According to Gordon et al. (2009) forgiveness is a process to the recovery from a traumatic event. Heintzleman, Murdock, Krycak & Seay (2014) argued that the level of trauma experienced by individuals may also relate to the level of one's commitment to a relationship as a result of infidelity. Traumatic events that upset salient identities or disrupt identities to which individuals are highly committed will have more destructive effects on psychological wellbeing compared to stressors that disrupt identities that are less important or identities that people are not committed to (Heintzleman, Murdock, Krycak, & Seay, 2014). Research has found that a higher level of commitment is related to higher levels of trauma and less forgiveness. It is argued that stress occurs within relational roles that is particularly significant to a person's sense of self is more likely to be harmful on the psychological health (Heintzleman, Murdock, Krycak, & Seay, 2014).

The need to promote forgiveness as a mental wellbeing intervention

According to Worthington et al., (2016) there is a need to promote forgiveness among communities, groups and individuals who have experienced trauma due to disasters like war. Studies done by Wade et al. (2014) showed that forgiveness interventions enable individuals to cope with the stresses of life which result in less depression and less anxiety. In support of

this, Worthington et al. (2016) suggest that the public health sector should implement interventions that promote forgiveness through community based campaigns, small groups and individuals. Interventions to promote in-depth forgiveness can be done through merely raising the awareness of forgiveness in a culture, although forgiveness can be perceived differently within a society (Worthington, et al., 2016).

Even in populations that have experienced or are in conflict and warfare, forgiveness interventions can be promoted for the benefit of the victims' or survivors' mental wellbeing. Worthington et al. (2016) argues that promoting forgiveness in therapeutic interventions that already exist is cost effective and useful. Using the strength based approach incorporating forgiveness in therapeutic interventions promotes resilience by unsticking individuals from forgiveness and by easing spiritual struggle. In addition, interpersonal forgiveness fosters other-orientedness, which may promote patience, self-control, positive mood and gratitude (Worthington, et al., 2016).

Psychological needs of refugees and asylum seekers

Literature has showed that there has been a growing interest in the mental wellbeing of refugees and asylum seekers since the 1980s (Fazel, Reed, Panter-Brick, & Stein, 2012). Mental health care has become a key priority for refugees and asylum seekers, with a strong focus on addressing the traumatic stress caused by their experience associated with forced migration. However, authors disagree about the nature and extend of the psychological needs among the refugee and asylum seeker population (Lima, 2016; Porter & Haslam, 2005; Van Ommeren, Saxena, & Saraceno, 2005).

Researchers have acknowledged the negative impact of the experience of forced migration on mental wellbeing, mentioning psychological distress as a major outcome for refugees and asylum seekers in South Africa (Smit & Rugunanan, 2015). According to Fazel, Reed, Panter-Brick and Stein (2012), there is limited empirical evidence on mental health of refugees and asylum seekers, especially for those living in third world countries. This calls for the need to study mental health and wellbeing of refugees and asylum seekers in South Africa looking at the psychological impact of forced migration and how the issue of forgiveness can be considered in the provision of mental wellbeing services among this vulnerable group. Attention has also been turned to the study of the impact of ongoing stressors on the mental health and wellbeing of refugees and asylum seekers, for instance the violent xenophobic episodes witnessed in South Africa in 2008 and 2015 (Smit & Rugunanan, 2015).

A serious concern has also been raised regarding the mental health and wellbeing of unaccompanied minors and children of asylum seekers in relation to their psychosocial development (Foong, et al., 2018). However, this is beyond the scope of this review because it will call for a separate discussion regarding the developmental issues of the unaccompanied minors and children of refugees and asylum seekers. Therefore this research study will focus on adult refugees and asylum seekers in South Africa.

Several studies have been done on psychiatric conditions and related syndromes among refugees and asylum seekers across nations. Most refugees and asylum seekers has been found to be suffering from post-traumatic stress disorder (PTSD), anxiety and depression (Fazel, Reed, Panter-Brick, & Stein, 2012). According to Fazel et. (2012) it has been found that the prevalence rates in adult refugees and asylum seekers for major depression have ranged from 3% to 80% and 3% to 86% for PTSD. After reviewing 20 psychiatric surveys of unselected refugees and asylum seekers, Fazel et al. (2012) came to a conclusion that refugees and asylum seekers are ten times more likely to have PTSD which affects their overall wellbeing than the host population.

Empirical research into affective disorders amongst refugees and asylum seekers is also very limited (Fazel et al., 2012). In a meta-analysis of 36 populations based studies of mental health amongst refugees and asylum seekers, it was found that a combined prevalence rate for depression is 44% and for anxiety is 40% (Lindert, von Ehrenstein, Priebe, Mielck, & Brähler, 2009). Compared to the general population, these rates for refugees and asylum seekers are substantially higher. In contrast, the combined prevalence rate for major depression of 5% was found in a review of 20 psychiatric surveys (Fazel et al., 2012). This rate was found to be similar in “western” general population as well.

Based on the literature that have been reviewed by the researcher there is need to further contextualize valid and relevant empirical research into the mental wellbeing problems of refugees and asylum seekers globally in order to produce an appropriate informed appropriate response. In addition, the researcher acknowledges that there is a growing body of research on psychological stressors on mental health and wellbeing. This research recommend the consideration of broader psychosocial needs when assessing needs for mental health and psychological care of refugees and asylum seekers.

According to Miller and Rasmussen (2010), there is a growing body of research that shows that political violence has an impact beyond the mental wellbeing at individual level. According to

this body of knowledge political violence has social health consequences for families, communities and other social institutions (Miller & Rasmussen, 2010). Exposure to political violence affect the family in many ways including its functioning and the structure resulting in violence within the family (Lima, 2016). At a community level, exposure to political violence may affect social ties due to differences in political affiliations creating distrust and strong hostility towards one another (Miller & Rasmussen, 2010). In addition, McCullough, Kurzban and Tabak (2013) argues that violent approaches to conflict resolution have been seen as the norm amongst the survivors of political violence. However, Jeong (2017) argues that resolving political conflicts in a violent way always brings destruction. Forgiveness and reconciliation have been found to be the best non-violent approaches to conflict resolution as it promotes peace amongst the victims of political violence (Jeong, 2017). This has made the researcher to put more attention in assessing the role of forgiveness on mental wellbeing among Congolese refugees and asylum seekers. These Congolese refugees and asylum seekers are survivors of political violence happening in Congo.

Although, this research study has paid less attention on the impact of post-migration factors on refugees and asylum seekers' mental wellbeing, factors such as xenophobia, legal status, social isolation, the socioeconomic resources of the host country and exposure to different kinds of discrimination have been found to increase the risk for mental health problems in South Africa (Handmaker, Hunt, & Klaaren, 2013). In South Africa, it has been found that the ongoing stressors related to socioeconomic and legal factors creates a serious mental health risk for refugees and asylum seekers (Crush & Tawodzera, 2014). This intensify the past traumas experienced from the pre-migration period.

The mental health difficulties experienced by refugees and asylum seekers reduces their capacity to cope with challenges they face in their daily lives (Smit & Rugunanan, 2015). This calls for attention to consider the mental health needs of refugees and asylum seekers. Due to the psychological difficulties that refugees and asylum seekers face (Smit & Rugunanan, 2015), it is important to consider a holistic and integrative approach that incorporates forgiveness in informing mental health interventions and programmes in order to provide effective psychological services to the refugee and asylum seeker population.

Mental wellbeing of Congolese refugees and asylum seekers in South Africa

Studies on international forced migration has shown that those seeking refuge often experience heightened feelings of emotional distress and a low sense of emotional well-being (Smit & Rugunanan, 2015). It has been found that many refugees and asylum seekers experience mental wellbeing problems due to the horrific atrocities they were exposed to in their home countries (Bandeira et al., 2010; Carswell, Blackburn, and Barker 2011; Kirmayer et al., 2011). It is also argued that some refugees and asylum seekers develop depression which may persist long after arriving in the host society. A survey that was done in South Africa showed that the mental wellbeing problems that refugees experience are also heightened by the levels of poverty among refugees and the fact that refugees are often victims of crime (xenophobic attacks) (Crush & Tawodzera, 2014).

However, it is not only the daily survival challenges that affect the refugees and asylum seekers' mental wellbeing (Smit & Rugunanan, 2015). Refugees and asylum seekers experience anxiety and distress because of the feelings of anger and hurt they hold against political groups causing war conflicts in their country of origin. In addition, refugees and asylum seekers experience anxiety and depression because of their concern for the wellbeing of their loved ones they left in the country of origin (Smit & Rugunanan, 2015).

According to the United Nations High Commissioner for Refugees (UNHCR) there is a major increase in worldwide refugee numbers (Betts, Loescher, & Milner, 2013). UNHCR (2016) reported that 490 000 persons originating from DRC were forced to seek refuge in other countries. DRC has been experiencing an ongoing cycle of war and violence for two decades now since late 90s (Ainamani, Elbert, Olema, & Hecker, 2017). Civilians suffer the consequences of different types of traumatic events such as being exposed to severe physical and sexual violence, death threats, witnessing loved ones being killed, kidnappings and being sexually abused. These traumatic experiences have a negative impact on the psychological wellbeing of the Congolese people (Smit & Rugunanan, 2015). As a result majority of Congolese refugees and asylum seekers suffer from stress and trauma related disorders like PTSD, substance abuse and depression. Research has shown that high PTSD prevalence among Congolese refugees and asylum seekers is a major concern because it goes beyond individual suffering and may impact the livelihoods of family members and entire communities due to impaired psycho-social functioning every day (Ainamani, Elbert, Olema, & Hecker, 2017).

Mental health interventions available to refugees and asylum seekers in South Africa

South Africa has been reported to have become a major destination for victims of and political unrest in Africa (UNHCR, 2016). Psychosocial support services by different organisations has been put in place in assisting victims of violence and conflict. This involves assisting refugees and asylum seekers to process their feelings of trauma and the violence they have experienced in their country of origin (Mohamed, Dix-Peek, & Kater, 2016). The Centre for the Study of Violence and Reconciliation (CSVR) in Johannesburg has been very instrumental for over 25 years in providing psychosocial services to refugees and asylum seekers who are victims of violence and conflict (Centre for the Study of Violence and Reconciliation, 2018). This organisation provides psychosocial counselling support to refugees and asylum seekers who are victims of violence and conflict. These services are offered to individuals, families and groups.

The United Nations High Commission for Refugees (UNHCR) plays a critical role in supporting refugees and asylum seekers in South Africa through its mental health projects (Kaplan, 2011). These projects provides direct comprehensive mental health and psychosocial services to refugees and asylum seekers. These services include counselling services, case management and psychiatric services. The UNHCR in South Africa also provides indirect psychosocial services to refugees and asylum seekers which include the community outreach and capacity building initiatives (Kaplan, 2011). These projects aim to improve the general mental health and psychological wellbeing of refugees and asylum seekers for them to deal with past trauma and the challenges they experience in South African such as xenophobia, unemployment and different forms of discrimination (WHO, 2018).

Other mental health interventions available to refugees and asylum seekers include the rehabilitation project for survivors of torture and African Torture Rehabilitation Model (Wilson & Drozdek, 2010). The rehabilitation project for survivors of torture is an intervention that provides psychosocial support to people who have experienced torture, cruelty, inhumane and degrading treatment (Wilson & Drozdek, 2010). This intervention is critical as torture remains a reality in African countries especially in South Africa and countries from Central African region. This is a clinical intervention that is based on contextually-informed, evidence based psychosocial model for the rehabilitation of people who have experienced torture (CSVR, 2018). This intervention addresses the adverse impacts of torture and including biological, social and psychological dimensions. This rehabilitation project for survivors of torture was

developed by the clinical team at the Centre for the Study of Violence and Reconciliation (CSV, 2018).

The above mentioned rehabilitation models have been criticized for not implementing evidence based interventions in treating people who have experienced torture (Jaranson & Quiroga, 2011). In South Africa, the rehabilitation centres used evidence based treatments that have been developed in relation to the treatment of Post-Traumatic Stress Disorder (PTSD) and this provides a limited perspective on the impact of torture (Wilson & Drozdek, 2010). Even though these treatments are crucial in the rehabilitation of people who have experienced torture especially those are diagnosed with PTSD, they fail to address the broader impacts of torture of the overall wellbeing of the victims (Wilson & Drozdek, 2010). This calls for the proposed research to find out if forgiveness can improve the mental wellbeing of individuals that have suffered from the psychosocial effects of violence. The proposed research will provide contextually based evidence on the role of forgiveness on the wellbeing of Congolese refugees and asylum seekers.

2.4. Theoretical frameworks

In demonstrating the central role of forgiveness on mental wellbeing, there has been substantial progress in developing models of forgiveness on mental wellbeing interventions. Researchers has begun the process of promoting forgiveness in therapy and challenged clinical social workers and clinical psychologists to consider and/or build therapeutic models that incorporate forgiveness (Lander, 2012). Literature done for the past years has suggested that forgiveness is helpful for people who experienced deep emotional pain related to unjust treatment by other people (Lander, 2012).

A number of convincing models have been developed to demonstrate the role of forgiveness on mental wellbeing. These models are based on empirical evidence, relatively structured and detailed in their explanation of forgiveness processes and dynamics. The models are predicted upon individual treatment to promote mental wellbeing, where victims of violence work with a therapist towards forgiving an offender for the wrongdoing committed (Malcolm, Warwar, & Greenberg, 2015). During the process of reviewing the literature on mental wellbeing and forgiveness, it has been found that most of the models of forgiveness are derived from the Gestalt theory and Positive psychology (Ivey, D'Andrea, & Ivey, 2011). This study was guided by these theories and two models of forgiveness that are based on empirical evidence which

are Pyramid model of Forgiveness and Adaptation and Development after Persecution and Trauma (ADAPT) model. The assumptions of these theories and models are the foundation for the interpretation of the results of the study.

Gestalt theory

Gestalt theory has relevance in this research study in understanding forgiveness. Gestalt theory argues that human beings seek to achieve mental wellbeing by addressing thoughts and emotions, for example when left with hurt and bitterness as a consequence of betrayal, because of human's innate tendency to want to finish or complete our experience (Harris, 2017). This theory states that we as human beings are incomplete, there are always situations and elements we have not finished and we are in a perpetual quest for balance (Harris, 2017). Having been exposed to hurt or betrayal and the associated feelings, one is left with wanting to get rid of the associated feelings through forgiveness. This theory is appropriate to focus on the holistic in terms of the methodology that was used in this research study. This involves the methods of data collection and interpretations, including the aim to understand subjectivity as whole, rather than separating the objective to be part of hypothetical deductive hypothesis (Evensen, 2013). This is applicable in understanding how each participant has managed to forgive armed groups killing civilians in Congo and how this has impacted on their mental wellbeing.

Positive Psychology

Positive psychology considers wellbeing by exploring individual's strengths that help in living a more satisfying and fulfilled life. Forgiveness is one of the strength. Extensive research has been done that support the association between forgiveness and positive psychological outcomes, mental wellbeing (Hojjat & Ayotte, 2013). However, forgiveness is not positive in an absolute sense, it should be considered in the context of specific situations in which it occur (Wade, Hoyt, Kidwell, & Worthington, 2014).

Positive psychology illustrates the importance of changing bitterness to positivity by gaining self-insight, and by changing your thoughts and patterns towards achieving a positive mental wellbeing (Evensen, 2013). Positive psychology is a paradigm that is included in the theoretical framework of this study because it emphasizes on the need to understand the positive side of human experience and what makes life worth living without excluding the negative (Joseph & Linley, 2008). The aim of positive psychology is to promote a more holistic approach to the understanding of positive and the negative experiences of human beings. This leads to the need for showing how positive psychological approaches like forgiveness promote a positive mental

wellbeing even after negative experiences (Joseph & Linley, 2008). This is appropriate for this study as the aim to explore the role of forgiveness on mental wellbeing of refugees and asylum seekers who are victims of political violence.

REACH Forgiveness model

Building up on the gestalt theory and positive psychology, Worthington (2015) developed a model called the REACH Forgiveness model. Based on extensive research, this model was designed to promote forgiveness in achieving mental wellbeing by reducing depression and anxiety. This model has five stages which are (i) Recalling the hurt, (ii) Empathizing with the offender, (iii) Accepting and understanding the Altruistic gift of forgiveness, (iv) Committing to forgive, and (v) Holding on to forgiveness, even if additional forgiveness is necessary. This model of forgiveness states that unforgiveness negatively affect the individual's mental, emotional and physical wellbeing (Wade, Hoyt, Kidwell, & Worthington , 2014). However, if the individual follow the five stages of cognitive-behavioural-affective stages of forgiveness, his/her mental, emotional and physical wellbeing will be improved. This model is relevant in this study as it helps the researcher in the understanding of how individual's state of unforgiveness is related to mental wellbeing.

Based on empirical evidence, this model suggest that a therapeutic approach to mental wellbeing should include individuals recognizing, accepting and acknowledging their feelings of anger, hurt and/ revenge (Wade, Hoyt, Kidwell, & Worthington , 2014). In addition, the victims should learn empathy, genuineness and positive regard toward the offender. An important aspect of this research study is the focus on incorporating forgiveness on mental wellbeing interventions. This model is relevant for this study as it contributes to the understanding of how mental wellbeing interventions can incorporate the process of forgiving by providing steps that needs to be followed in the process.

Adaptation and Development after Persecution and Trauma (ADAPT) model

Due to the growing concern of the mental health and psychosocial wellbeing interventions needed to assist refugees and asylum seekers exposed to mass conflict, the ADAPT model offers a unifying, conceptual framework to underpin mental wellbeing interventions on victims of mass conflict (Silove, 2013). This model is relevant in this study as it demonstrate links extending across the continuum of adaptive and maladaptive psychological responses to mass conflict and the mental wellbeing interventions needed to support communal and individual recovery from the trauma experienced. According to this model, unforgiveness resulting in

depression is a maladaptive psychosocial response which affects the wellbeing of an individual (Silove, 2013). The ADAPT model offers a concise framework that was used in this study in understanding: the overall impact of traumatic events like civil wars on mental health and adaptation; the adaptive changes that are possible for the victims; and the multilevel interventions (forgiveness included) that promote the process of recovery to promote mental wellbeing (Silove, 2013).

2.5. Conclusion

This chapter has highlighted a range of recent literature on the role of forgiveness on mental wellbeing. The chapter has illustrated the factors that affect forgiveness as well as the benefits forgiveness on the mental wellbeing of victims that has been exposed to war. The potential value of integrating forgiveness in mental wellbeing interventions on a number of levels has been explored. However, a number of gaps were identified within the literature relating to post-conflict recovery using forgiveness among refugees and asylum seekers in South Africa. Due to the gaps identified in the literature, this study explored the role of forgiveness among Congolese refugees in South African who have been exposed to war in their mother country. Finally, a number of models have been discussed that demonstrate the role of forgiveness on mental wellbeing.

CHAPTER THREE

METHODOLOGY

3.1. Introduction

This chapter describes the methods used in understanding the mental wellbeing of Congolese refugees and asylum seekers who were exposed to war, and the role forgiveness plays in improving their mental wellbeing. This chapter begins by discussing the research approach and design, followed by a discussion of the methods used, explanations of the setting (site), the sampling techniques used and participants, data collection, including the procedure followed and data analysis. Finally, the chapter will be concluded by a discussion on ethical considerations and limitations of the study.

3.2. Research approach and design

The qualitative research approach was considered appropriate in understanding the role of forgiveness on the mental wellbeing of Congolese refugees and asylum seekers who experienced traumatic wars and were displaced due to political wars. Qualitative research refers to the broad approach in social research that is based upon the need to understand human and social interaction from the perspectives of insiders and participants (Neuman, 2006). A descriptive design was used to document the phenomenon of interest. According to Grove & Gray (2018), descriptive research design involves direct exploration, analysis and description of the phenomena, as free as possible from unexplained presuppositions, aiming at maximum intuitive presentation. The emphasis was placed on the extent to which how these migrants have managed to forgive political groups killing civilians in Congo and how this is influencing their mental wellbeing. The study however, acknowledges one of the weaknesses of using qualitative approach which is that research quality is heavily dependent on the individual skills of the researcher and more easily influenced by the researcher's personal biases (Creswell, 2003).

This research used a case study as a research design. A case study is a detailed analysis of a group of people and their relationship to particular phenomena (Yin, 2009). One of the main reasons this research considered a case study is because it allows the researcher to collect detailed information on the participants (Yin, 2009). A case study was considered as a qualitative research design because the researcher is interested in gaining a deeper understanding of the role of forgiveness on the mental wellbeing of Congolese refugees and

asylum seekers in Yeoville. Data in these case studies was collected through interviews. The study however, acknowledges the disadvantages of using case studies which is that they are time consuming (Yin, 2009).

3.3. Setting

This study was conducted in Yeoville, Johannesburg with Congolese refugees and asylum seekers who reside in this location. All interviews were conducted at Refugee Children's Project (RCP)'s offices. This organisation provided the researcher with an office that is conducive for conducting interviews because it offers privacy. RCP was not involved in the selection of participants and they did not influence the data collection process. Participants were given a choice to choose the location/venue of the interview and they all preferred to be interviewed at RCP offices. According to King and Horrocks (2010), giving participants an opportunity to choose the interview site may result in the participants feeling more empowered in their interaction with the researcher. The researcher informed the participants about the content of the interview before conducting the interview. This was done so that the client may choose a venue or site with no constraints where they are comfortable to speak freely (King & Horrocks, 2010).

3.4. Population

Congolese refugees who are aged 30 to 40 years and live in Yeoville area were the targeted population for participation. According to Rubin and Babbie (2010) research population refers to the aggregate or totality of all the objects, subjects or members that conform to a set of specifications required for participation. These Congolese refugees and asylum seekers have lived in Congo and were displaced by war conflicts happening in their mother country. These participants were able to reflect their forgiveness on these killings and also reflected how this influences their mental wellbeing.

3.5. Sample

The participants of this study were chosen based on their common experience with the aim of generating detailed patterns or themes and relationship of meanings of their experience as victims of war in Congo. The researcher personally recruited a sample of 10 female participants. A sample is a subset of a population selected to participate in the study, it is a fraction of the whole, selected to participate in the research project (Neuman, 2006). For a case study; as interpreted by Holloway and Galvin (2016), about 10 descriptions of a target

experience is required in order to discern its necessity and sufficient constituents. All 10 participants were Congolese refugees and asylum seekers (30 to 40 years old) who have lived in Congo and were exposed to the war conflicts happening in Congo. Congolese refugees and asylum seekers who are 30 to 40 years old have been directly influenced by the 1998 outbreak of fighting in the DRC that was labelled the world deadliest conflict since World War II (Hughes, Joshi, Jonathan , Sisk, & Solorzano, 2015).

The participants were also chosen considering that they are able to speak English fluently and they have lived in South Africa for less than 5 years. The researcher considered these participants as they were able to inform the study with enough information regarding their experiences which helped the researcher to answer the research question (McGregor, 2017). Choosing the participants who have been exposed to the war in Congo helped the researcher to gain understanding and fully describe the phenomenon being investigated. This also helped the researcher to achieve some degree of richness, depth and validity. However, the researcher struggled to get male participants. 5 male Congolese refugees and asylum seekers were approached and they all refused to participate in this study highlighting that they do not want to talk about their emotions or feelings.

3.6. Sampling techniques

Sampling involves a process of selecting a sub-section of a population that represents the entire population in order to obtain information regarding the phenomenon of interest (Rubin & Babbie, 2010).

A purposive sampling method was used, which is common in qualitative research to identify and select individuals that are knowledgeable about or experienced with a phenomenon of interest (Palinkas, et al., 2015). A purposive sampling requires selecting participants who are knowledgeable about the issue in question, because of their sheer involvement in and experience of the situation (Neuman, 2006). While Belk (2007) states that purposive sampling refers to selection of sites or participants that will best help the researcher understand the problem and the research question, they must be willing to reflect on and share this knowledge. Purposive sampling was considered because the researcher already knew the group of people that possess the data and where to find them. Congolese refugees and asylum seekers were found to be the best source of rich and valuable information regarding interpersonal forgiveness and mental wellbeing, as they are experts regarding their experiences. These participants were selected based on their nationality and exposure to the war, for the purpose of sharing their

knowledge and experiences as victims of war with the researcher (Streubert , Streubert, & Carpenter, 2011).

Another sampling technique that was employed in this study is the purposive snowball sampling technique, in which participants were selected based on referral from other participants (Black, 2009). Through referrals, the researcher was able to obtain participants knowledgeable about the issue in question and then asked them if they know other people who would be suitable to participate in this study. Through these referrals, participants were identified cheaply and efficiently, and this was useful because participants were difficult to locate. The researcher employed purposive snowball technique as a way of getting more participants because some of the participants refused to be interviewed.

3.7. Research instrumentation

The main instrument that was used in this study is a semi-structured interview schedule (see Appendix C) which had 5 demographic questions and 5 open ended questions that assisted the researcher to acquire in-depth information from the participants. Semi-structured interviews involve the use of predetermined questions where the researcher was free to seek clarification (Holloway & Wheeler, 2013). The interviews were carried-out based on questions on the interview schedule which was developed according to the research aim and objectives. The researcher ensured that the schedule aid in answering the research question. Questions contained on the interview schedule were open-ended which allowed an interactive and explorative discussion in each and every interview (Belk, 2007). This allowed the researcher to probe further in exploring the role of forgiveness on mental wellbeing of participants. In addition, the interview questions were also based on the literature reviewed on the role of forgiveness on mental wellbeing of people who experienced war. Questions on the interview schedule were designed in such a way that they reflect the aim, objectives as well as the theoretical framework of the research study (Neuman, 2006). Having an interview schedule was very helpful because it guided the researcher especially when the interview was going off track.

3.8. Pre-testing the research instrument

Pretesting of the research instrument was conducted with two Congolese refugees who were not included as respondents in the main study. Pre-testing involves testing the research instrument in conditions as similar as possible to the research, but not in order to report results but rather to check for glitches in wording of questions or lack of clarity of instructions

(Flick, 2009). This process is also called a pilot study; it was done to check if there was anything that could impede the instrument's ability to collect data in an economical and systematic fashion. Pretesting the research instrument helped the researcher to construct the questions appropriately and to remove some of the questions that did not seem to serve a purpose at all (Flick, 2009). It also ensured that there was a flow in the way questions were asked. The researcher also realised that he needed to simplify some of the questions because the participants did not understand the terminology.

It was important to pre-test the semi-structured interview schedule before administering it to the research sample. Pre-testing gives the researcher an opportunity to see what questions work well, what questions sound strange, what questions can be eliminated and what needs to be added (Flick, 2009). Pre-testing of the research instrument should be conducted systematically, with potential respondents and using the same method of administration (Neuman, 2006). The temptation to hurry over them, using just a convenience sample, was avoided by the researcher. Pretesting of the research instrument was done 2 weeks before conducting the main study. This gave the researcher enough time to make revisions to research instrument to ensure that appropriate questions were asked and that questions do not make respondents feel uncomfortable (Hurst, et al., 2015).

3.9. Data collection method

In this research study, the data was collected from face-to-face semi structured interviews. All participants preferred the interviews to be conducted at Refugee Children's Project's offices. One-on-one in-depth face-to-face interviews were conducted in the form of semi-structured interviews. Semi-structured interviews helped the researcher to obtain vital information needed to answer the research question. Thus semi structured interviews allowed the researcher to generate rich data that expanded the understanding of the role of forgiveness on mental wellbeing of Congolese refugees and asylum seekers.

Semi-structured interviews are comprised of predetermined questions with mostly fixed order but allow the flexibility for adding further questions for clarification during the interviews (Neuman, 2006). According to Greenstein, Roberts and Sitas (2003), semi-structured interviews allow for more flexibility around the sequence of questions to be asked and also for the researcher to allow the respondent to speak more broadly about the topic being discussed. Semi-structured interviews were also considered as they allow for the researcher to gain control

during interviews and will therefore prevent respondents from going off topic (Greenstein, Roberts , & Sitas, 2003).

Due to the nature of the interviews, the discussions were partly determined by the semi-structured interview schedule and partly determined by the participant's responses to the questions. The researcher would probe for the participants to explain deeper on other responses that seemed to be more relevant to the study. Most of the interviews began with the reasons why the participants relocated from their mother country (Congo) and then typically progressed onto their experiences of war and how it affected their mental wellbeing.

In order to enhance trustworthiness, the researcher conducted a pre-test study to assess the usefulness of the interview schedule. The researcher ensured trustworthiness through the use of a standardised interview schedule and audio-taping was done during interviews in order to provide precise quotations during the data analysis process. The length of most interviews were between 45 minutes to one hour and the shortest was 20 minutes. Only a few interviews exceeded one hour as the participants continued explaining their experiences.

The advantages of using semi-structured interviews involves probing for further depth and detail, gaining actual participant understanding and clarifying on possible ambiguity (Neuman, 2006). The disadvantages encompass the fact that participants have to be committed to process for best results and data analysis requires analytical skill, patience and plenty of time (Neuman, 2006).

3.10. Procedure

One-on-one, face-to-face interviews were conducted with each participant. The interviews provided participants with privacy and according to Babbie (2015), this encourages participants to be more open and comfortable. The interviews were approximately 45 to 60 minutes. The interviews were conducted at a time and location that was convenient for the participants. Allowing the participants to decide the convenient time and location prevented unduly disruptions. In addition, conducting an interview at a location that is familiar to the participant made the participant to be comfortable leading to an effective conversation and rapport (Babbie, 2015). All interviews were conducted at RCP offices. Allowing participants to choose convenient time and location was also aimed at increasing the willingness of the participants to comply with the research process.

In the beginning of every interview, the researcher introduced himself to the participants and also informed them about the objectives of the research. The participants were informed and briefed on the purpose of the research. Participants were informed that their participation is voluntary and that should they wish to withdraw from the research, they are free to do so and nothing will be held against them in any way. According to Neuman (2006), the researcher need to explain to participants, their obligations and responsibilities of participating in the research at the beginning of the study. Participants were also informed that they are allowed to withdraw from any question/s which they feel uncomfortable with answering. All this information was provided in the participant information sheet that was given to every participant at the beginning of the interview (See appendix A).

Confidentiality was then explained. According to Babbie (2015), the researcher must keep confidential information obtained in the research unless the participant has agreed and given consent of publishing the information before the research begun. Participants were informed that identifying information will not be included in the transcript. Pseudonyms were employed to ensure that privacy and anonymity is maintained. This involves keeping the identity of the participant secret by not identifying the ethnic or cultural background of respondents, refraining from referring to them by their names or divulging any other sensitive information about a participant (Mugenda, 2011). Participants were also informed that the results of the study may also be used for academic purposes (including books, journals and conference proceedings) and a summary of findings will be made available to the participants on request.

Participants were given an opportunity to ask any questions they had regarding their participation in this research. After answering the questions the participants had, the researcher then went through the consent forms with the participants (See appendix B). The participants were asked to sign four consent forms if they were willing to participate in this research study. Two of the consent forms were for the participants to keep for their own records. Once informed consent was obtained, the researcher started with the interview. 10 female participants were willing to participate in the study and with their permission interviews were tape-recorded and no one had access to the information except the research supervisor.

Towards the end of the interview, each participant was again given an opportunity to ask any questions they had regarding the interview or their participation. All participants were told that the data obtained from the interviews will be kept in a secure password computer only accessible to the researcher. To signal the end of the interview, every participant was thanked

for her participation in the research study. The participants were referred to RCP for therapeutic debriefing if they felt disturbed by the issues that were discussed during the interview. The researcher also reflected on the interview technique after every interview and this helped to identify areas where the interview technique could be improved.

3.11. Data analysis

Data analysis is the systematic organisation and synthesis of the research data and the testing of research hypotheses, using those data (Greenstein, Roberts , & Sitas, 2003). Thematic content analysis was used to analyse data collected from the semi-structured interviews. Thematic content analysis refers to the process whereby the researcher groups the raw collected data into a list of common themes as expressed in actual words by the research participants (Neuman, 2006). This research used thematic content analysis as a way of analysing the data collected and this form of data management involves identifying patterns of meanings and organizing them in form of themes so that the data answers the research question (Neuman, 2006). Thematic content analysis was considered appropriate for this research study because it allowed the researcher to organise raw data into intangible units of information and to group related categories and themes into subthemes.

In analysing data, the researcher used the following steps as outlined by Braun and Clarke (2013).

- 1) Familiarizing with data- the researcher familiarised himself with all the data collected by transcribing the 10 interviews that he conducted. Although the process of transcribing these interviews was time-consuming, frustrating and at times boring, this process helped the researcher in familiarising with the data.
- 2) Generating initial codes- the researcher generated an initial set of ideas about what was in the data and what was interesting in them. The researcher then produced initial codes for each unit of analysis through the process called open coding. To develop a coding schedule, the researcher produced initial codes from the first three transcripts. The remaining transcripts were compared with initial codes generated from the first three transcripts. However, new codes were added to the schedule whenever they were identified at a later stage.

- 3) Searching for themes- after all the data was initially coded and collated, the researcher moved on to sorting different codes into potential themes. All relevant coded data extracts was collated within the identified themes. The researcher also used visual representation to sort out different codes into themes. A thematic map including a table of themes was developed. According to Braun and Clarke (2013), developing a visual representation of themes emerging from the coded data is helpful to the researcher in understanding the relationship between codes and between themes as well as sub-themes.
- 4) Reviewing the themes- this process involved refining the themes identified. During this process the researcher discovered that some themes were really not themes because there was no enough data to support them. Other themes were combined to form one theme and other themes were broken down into separate themes. According to Braun and Clarke (2013), reviewing themes helps the researcher to have a good idea of the different themes, how they fit together and what these themes tell about the data.
- 5) Defining and naming the themes- this involves a continuous process of defining and further refine the themes that will be presented in the next chapter as research findings. The researcher identified the meaning of each theme and determined the aspects of the data each theme captures.
- 6) Producing the report- this phase involves final analysis and a write up of the research report. This was done after the researcher has fully worked out all the themes from the coded data extracts. According Braun and Clarke (2013), the final write up should provide sufficient evidence of the themes within the data collected. This research study ensured that there is enough data extracts to demonstrate the prevalence of each and every theme identified.

3.12. Ethical considerations

Ethical approval for this research study was obtained from the Department of Social Work Human Research Ethics Committee (Non-medical) of University of Witwatersrand, my

research supervisor (Dr Thobeka .S. Nkomo) and Refugee Children's Project (RCP) (see appendix G & H).

Ethics has become a cornerstone for conducting effective and meaningful research (Neuman, 2006). As such, the ethical behaviour of individual researchers is under-unprecedented scrutiny (Behrman & Field, 2004; Best & Kahn, 2016; Trimble & Fisher, 2016). This research study has made efforts to maintain high standards of professionalism and research ethic principles such as, informed consent, protection and welfare of participants, debriefing of participants, respecting participants' right to withdraw from research, maintaining confidentiality and anonymity of data.

Informed consent: Participants were informed and briefed about the purpose of the research. Participants were informed that their participation is voluntary and that should they wish to withdraw from the research, they are free to do so and nothing will be held against them in any way. According to Neuman (2006), the researcher need to explain to participants, their obligations and responsibilities of participating in the research at the beginning of the study. Participants were also informed that they will be allowed to withdraw from any question/s which they feel uncomfortable with answering. All this information was provided in the participant information sheet that was given to every participant at the beginning of the study. (See appendix A).

Participants were given an opportunity to ask any questions they had regarding their participation in this research. After answering the questions the participants had, the researcher then went through the consent forms with the participants (See appendix B). The participants were asked to sign four consent forms if they were willing to participate in this research study. Two of the consent forms were for the participants to keep for their own records. Once informed consent was obtained, the researcher started with the interview. All the participants were willing to participate in the study and they also agreed to be tape-recorded.

Confidentiality, anonymity and privacy: Confidentiality was explained and the researcher ensured that the participants understood it. With the permission of respondents, interviews were tape-recorded and no one had access to the information except the research supervisor. According to Babbie (2015), the researcher must keep confidential information obtained in the research unless the participant has agreed and given consent of publishing the information before the research begun. Participants were informed that identifying information will not be included in the transcript. Pseudonyms were employed to ensure that privacy and anonymity

is maintained. This involves keeping secret by not identifying the ethnic or cultural background of respondents, refraining from referring to them by their names or divulging any other sensitive information about a participant (Mugenda, 2011).

Avoiding harm: In the context of research ethics, harm may be broadly defined to include extreme physical pain or death, but also involves such factors as psychological stress, personal embarrassment or humiliation, or myriad influences that may adversely affect the participants in a significant way (Babbie, 2015).

This research exposed participants to psychological harm because the interviews made participants to relive the trauma they faced during the war. To address this ethical issue, the researcher got permission to refer participants for counselling services provided by Refugee Children's Project (RCP) (See appendix H). Participants had these services at their disposal anytime. The participants were referred to RCP for counselling and debriefing sessions after the interview. The researcher contacted the director of RCP and a plan to assist participants was put in place so that there is no harm done on participants as a result of choosing to participate. According to Babbie (2015), if there is a possibility that participants may have an adverse reaction to the research procedure, for example, an adverse reaction that may be emotional or psychological, the researcher must plan ahead for the provision of appropriate support to participants. This involves planning for the provision of a counselling services or other professional support in anticipation of a potential adverse feelings and thoughts.

3.13. Limitations

This study used a qualitative approach that provided rich knowledge and in-depth analysis of the participants' experiences. However, it is difficult to generalise the findings of the study beyond the sampling frame (Neuman, 2006). The interviews were conducted with female Congolese refugees and asylum seekers who were living in the Yeoville area. The findings of this study may only be applied on the female Africans that were exposed traumatic events due to war conflicts. It might be difficult to apply the findings of this study to the male population. As shown by other studies that there are gender differences when it comes to the issue of forgiveness (Ghaemmaghami, Allemand, & Martin, 2011). Another limitation is that the researcher's data collection was limited to one local area (Yeoville) and access to the participants depended on the people's willingness to participate. In addition to willingness to participate, only female Congolese were willing to participate. 5 Congolese men were

approached by the researcher and they refused to participate highlighting that they are not willing to express their emotions.

The qualitative approach was used because this study was aimed at deepening the understanding of the phenomenon, however due to more time spent for interviews, only a small group could be studied (Creswell, 2003). Interviewing Congolese refugees and asylum seekers living in different parts of Johannesburg was going to give an enriched narrative. This was going to make comparisons possible due to considerable variations of stories and different experiences.

The researcher acknowledges one of the weaknesses of using qualitative approach which is that research quality is heavily dependent on the individual skills of the researcher and more easily influenced by the researcher's personal biases (Creswell, 2003). However, to reduce the researcher's bias, the researcher provided an audit trail and a reflexive journal that highlights every step of data analysis that was made in order to provide a rationale for the decisions made. According to Bowen (2009), an audit trail provides visible evidence from the process and the product that the researcher did not find what he/she set out to find. Ensuring confirmability will help to establish that the research findings accurately portray participants' responses (Bowen, 2009).

Finally, although there was high level of disclosure by the respondents, the narration of their experiences or responses may cause some bias (Creswell, 2003). The participants might have reported less of what they actually experienced or reported some events with great emphasis. Some participants' responses could be biased due to bitterness or emotions that arise for their traumatic war experiences.

3.14. Conclusion

A detailed account of the methodology used in this study has been provided in this chapter. Qualitative research approach and case study design was considered appropriated for this study. Convenient sampling and snowball sampling techniques, and semi-structured interviews were seen by the research as relevant to generate data for this study. The process of data collection and data analysis has also been clearly described in this chapter. The research complied with ethical requirements of getting consent among participants, ensuring confidentiality, avoiding harm and getting approval to conduct this research study. Lastly, this chapter presented the limitations of the study.

CHAPTER 4

RESULTS

4.1. Introduction

This chapter presents the research findings from the study conducted. The study explored the role of forgiveness on mental wellbeing interventions among Congolese refugees and asylum seekers. This chapter will begin by reporting the demographic information of the participants, followed by the themes originated from the study and the discussion of results/findings.

4.2. Demographic information

Demographic factor	Sub-category	No.
Nationality	Congolese	10
Gender	Female	10
Number of years stayed in South Africa	5 years or less	10

Table 1: Profile of participants (N=10)

The distribution of table 1 shows the demographic profile of the respondents. 10 female respondents were interviewed and these respondents are between ages of 30 to 40. 5 males were approached by the researcher and they refused to be interviewed highlighting that they are not willing to express their emotions of their experiences. All 10 respondents are Congolese and they all understood English. The table also indicate that all the respondents have been living in South Africa for 5 years and less.

4.3. Themes that emerged from the research study

Category	Quotations	Themes
<p>Causes of migration</p>	<p><i>“.....they killed my father and my mother. My father was a king... (Started crying) and because of the war in Congo they wanted him to die so they killed him so that they can take the land. Bemba’s people wanted my father to die because he was in Kabila’s political party.”</i></p>	<p>Political conflicts</p>
	<p><i>“Yeah I came here because my husband was here. He came here in 2005 so he is the one who called me to come here...”</i></p>	<p>Following spouse</p>
<p>The effect of the causes migration on mental wellbeing</p>	<p><i>“....till today if I see some soldiers I am scared. Maybe someone has a gun hmmm I don’t like it, I get scared anywhere. If I see this I will remember that story. It makes me stressed and ask myself why why why did that happen. They even cut my neighbour’s hands and legs and killed the children.”</i></p>	<p>Psychosocial</p>
	<p><i>“Because I was feeling like everybody are better, it’s only me who is not fine, only me who have problem. I wanted to</i></p>	<p>Pessimism vs pessimism</p>

	<p><i>end myself, you see the car almost killed me. It was because of the stress I had. And from that day I decided, I said no you see now if I die, who is going to take care of my kids.”</i></p>	
	<p><i>“I don’t know where my husband went. He just left during that period when all this was happening. They wanted to kill him as well so he ran away. He did not even say good bye.”</i></p>	<p>Separation and loss of partners</p>
<p>Forgiveness</p>	<p><i>“I don’t know what to say..... There is nothing I can do, I just leave it to God. You know God is the one that passes judgement.”</i></p> <p><i>“I am Christian and I pray to God to forgive them. I have forgiven them.”</i></p>	<p>Christianity and forgiveness</p>
	<p><i>“NO! I will never forgive them because what they did destroyed my life and my family’s life. Look now my parents are dead, my husband is gone maybe they killed him too. My life is difficult because of them. I will never forgive them. Maybe one day I will but now I’m still feeling the pain because they finished me. Since I left Congo I am not happy. I am always</i></p>	<p>Trauma exposure and forgiveness</p>

	<p><i>sad and life is getting hard and hard every day.”</i></p>	
	<p><i>“NO! I will never forgive them because what they did destroyed my life and my family’s life. Look now my parents are dead, my husband is gone maybe they killed him too. My life is difficult because of them. I will never forgive them. Maybe one day I will but now I’m still feeling the pain because they finished me. Since I left Congo I am not happy. I am always sad and life is getting hard and hard every day.”</i></p>	<p>Current Socio-economic status and forgiveness</p>
<p>Need for social work services</p>	<p><i>“Yeah I did that.... I was so stressed eish (shaking head) I had no hope. Then they showed me a social worker somewhere by Bertrams there, that’s the place I went to see them...I was very stressed that’s why they showed me a social worker that side. It after I talked to the social worker I begin to feel better but before I couldn’t forgive him. If something happens to me I was blaming. Now I have forgiven him.”</i></p> <p><i>“When I got here, the people I was staying didn’t tell me anything about social workers, so I didn’t know about them.”</i></p>	<p>Trauma counselling (Did you receive any therapeutic counselling)</p>

	<p><i>“Yeah I did that.... I was so stressed eish (shaking head) I had no hope. Then they showed me a social worker somewhere by Bertrams there, that’s the place I went to see them...I was very stressed that’s why they showed me a social worker that side who encouraged me to forgive. After I talked to the social worker I began to feel better, but before I couldn’t forgive him. If something happens to me I was blaming. Now I have forgiven him.”</i></p>	<p>The importance of forgiveness on mental wellbeing (how did this affected your mental wellbeing?)</p>
<p>Survival strategies of Congolese refugees and asylum seekers</p>	<p><i>“I was doing like working and I was selling in the shop there by Bruma street but that Chinese shop was closed and then now I am selling there at rocky street. I sell second hand clothes.”</i></p>	<p>Precarious work</p>
	<p><i>“Last year I came to Refugee Children’s Project (RCP) for food and uniforms, they gave me food parcels for 3 months and also bought uniforms and books for my kids. Since they stopped giving us food, we have been struggling again, life is difficult.”</i></p>	<p>Aid from nongovernmental organisations (NGOs) and the government</p>

	<p><i>“No... no one is working at home. We are renting a room, my grandmother is getting help from SASA grants. That’s the money we use to pay rent. I also sometimes buy small things and sell them. Some other people who have a good heart can give me something. That’s how we are surviving.”</i></p>	
	<p><i>“When we got to South Africa the driver showed me where I can get other Congolese refugees and I found some other people that were willing to help me whilst I look for a job and a place to stay.”</i></p> <p><i>“...yeah at least now I have protection because one of my blood is staying with me. Before I met my grandmother, I was feeling like I was alone in this world, I am alone I don’t know anyone.”</i></p>	<p>Social networks</p>
	<p><i>“...things also got better after I met my husband. We started helping each other to pay for things, unlike when I was alone. My husband was working as a security guard and they didn’t pay him a lot of money.”</i></p>	<p>Rely on partners</p>

<p>Challenges faced by Congolese refugees and asylum seekers</p>	<p><i>“Even with home affairs I am not a refugee in South Africa, I have only asylum and I have renew it after every 6 months. Till today they there’s no answer about my refugee status application.”</i></p> <p><i>“And also my child doesn’t have a birth certificate. I went to Home Affairs and they are not doing anything. Imagine I walk to Home Affairs with the baby on my back and every time I go there they just check my asylum and say they will do it. It is just tough.”</i></p>	<p>Documentation</p>
	<p><i>“It is really difficult my brother. It is a problem to even pay rent. You know I even put the people so that they pay money, me I stay in the sitting room. So I have a flat so I put people to rent the bedrooms and I stay in the sitting room, that’s how we pay rent. We collect money from the people who rent the bedrooms and we combine it to pay rent. Sometimes it is difficult to find food to eat, when we find food we eat and when we don’t we just sit. You know when my husband was working it was ok but now he is now working things are very tough.”</i></p>	<p>Deplorable living conditions</p>

	<p><i>“Then I went to The Centre for the Study of Violence and Reconciliation (CSVR) to seek for protection. CSVR send me to Ikhaya Lethemba for protection. That’s how I got to Ikhaya Lethemba. You know at the shelter they were treating us so bad. The sisters would shout at us telling us that we should go back to our country, why are we here. I and my family couldn’t survive. It was so bad. And they told us that we were going to stay there for 3 months and after 3 months they told us to leave. They refused to let us live longer whilst we still looking for a place to stay.”</i></p>	<p>Social exclusion</p>
	<p><i>“The other job was just....and then one day I felt so so bad like a white men who was a manager he demoted me because he wanted to sleep with me and then what happened.... Uhhmm...when I started working I was on the till with his wife. How can I feel I am at the till, his wife is training me and then his husband want me to sleep with me because he is a supervisor there and suddenly when I refuse it, he demoted me from the till point to the cleaner.....”</i></p> <p><i>“The driver asked me to have sex with me and told me that if I don’t have sex with him he was going to leave me at the</i></p>	<p>Abuse and exploitation</p>

	<p><i>border. The driver also said that he can leave me and take another women that will agree to sleep with him.....(silence)... so I had to sleep with him because.... What was I going to do with my children at the border because we didn't have passports, we were just hiding inside the truck so that they don't see us at the border."</i></p>	
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Table 2: the themes that emerged from the study as well the direct quotes from the interviews.

4.4. Results/findings

4.4.1. Causes of migration

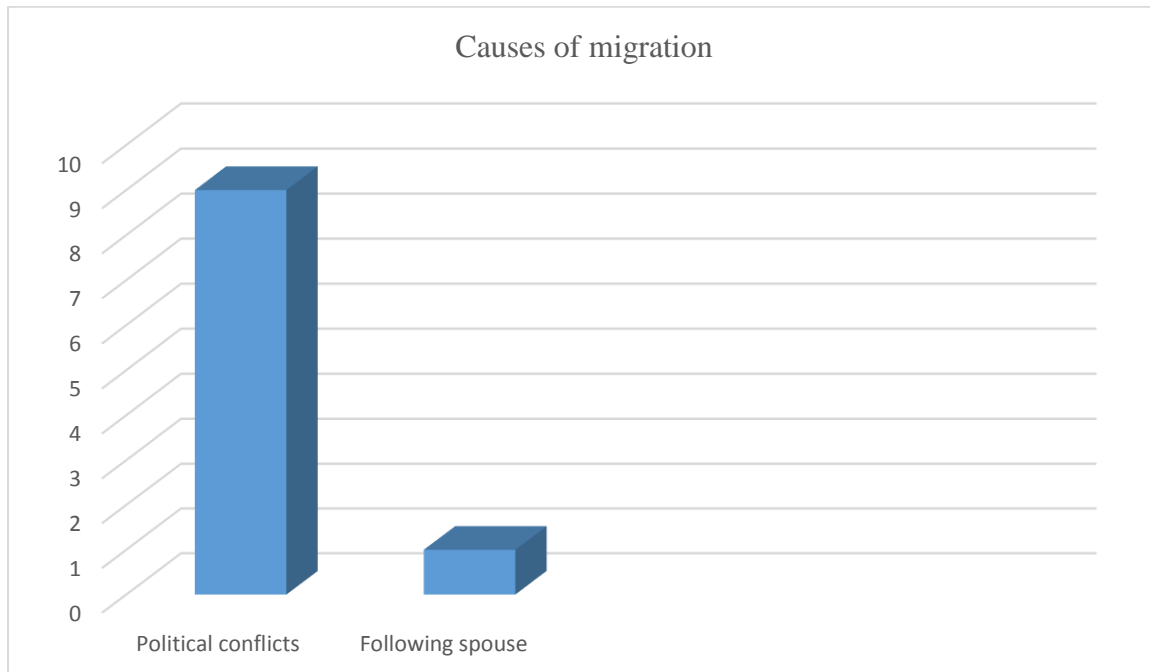


Figure 1: Graphic representation of the causes of migration among participants.

Political conflicts

The respondents have reported that they migrated from Congo due to several reasons. Nine respondents reported that they migrated from Congo because of political conflicts (see figure 1). Speaking of the political reasons, two of the respondents revealed that they were tortured and sexually abused by armed soldiers and the other eight left because they feared for their lives as their husbands were being targeted by either state forces or rebels. UNHCR (2016) reported that 490 000 persons originating from Congo were forced to seek refuge in other countries. DRC has been experiencing an ongoing cycle of war and violence for two decades now since late 90s (Ainamani, Elbert, Olema, & Hecker, 2017). These traumatic experiences led the participants of this study to migrate because they feared for their lives. One of the respondents migrated because her parents were killed in front of her and she was also raped by the rebels in Congo. She explained the reason as:

“.....they killed my father and my mother. My father was a king... (Started crying) and because of the war in Congo they wanted him to die so they killed him so that they can take the land. Bemba’s people wanted my father to die because he was in Kabila’s political party. On the same day they killed my parents, they also raped me. Those people are heartless and they wanted us to suffer and they were happy.”

Following spouse

Linked to political reasons one of the respondents indicated that she came to South Africa because she was following her husband, whose life was in danger (see figure 1). Research has it on record that in the Democratic Republic of Congo (DRC), adult men are at more risk of being targeted in the political conflicts currently happening in DRC (Christian, et al. 2011). The husband of the respondent migrated from Congo because he wanted to be killed by the rebels and he later instructed her wife to follow him to South Africa. In explaining this, the respondent said:

“Yeah, I came here because my husband was here. He came here in 2005 so he is the one who called me to come here.”

4.4.2. The effects of political conflicts on the mental wellbeing of Congolese refugees and asylum seekers

Psychosocial factors

Due to the trauma experienced, all the respondents show the symptoms of depression, anxiety, panic attacks and lost sense of hope. Depending with the level of exposure to trauma in Congo some respondents reported that they experience panic attacks and anxiety when they encounter something that reminds them about their past experience in Congo. One of the respondents stated that:

“....till today if I see some soldiers I am scared. Maybe someone has a gun hmmm I don’t like it, I get scared anywhere. If I see this I will remember that story. It makes me stressed and ask myself why why why did that happen. They even cut my neighbour’s hands and legs and killed the children.”

All the participants indicated that these political conflicts forced them to leave their family members in Congo, and they constantly think about their whereabouts, if they are still alive or dead. Half of the respondents feel like they are isolated in a country where they do not belong to. These thoughts result in the respondents being stressed and having thoughts of suicide.

“Because I was feeling like everybody are better, it’s only me who is not fine, only me who have problem. I wanted to end myself, you see the car almost killed me. It was because of the stress I had. And from that day I decided, I said no you see now if I die, who is going to take care of my kids.”

Two of the respondents reported that they were raped and tortured by male soldiers when they were in Congo. These respondents have demonstrated higher levels of anxiety post the experience. One of the respondents stated that because of rape she is having relationship problems, she is uncomfortable being around men and she cannot stay in the dark.

“I was raped (she looked down and continued crying) It was first time, I didn’t know men (having sexual intercourse), like it was difficult for me, even now it is affecting my relationship. Even when I’m with a man I just feel insecureIn that I don’t express myself”

“....till today if I see some soldiers I am scared. Maybe someone has a gun hmmm I don’t like it, I get scared anywhere. If I see this I will remember that story. It makes me stressed and ask myself why why why did that happen.”

These findings are related to the literature on the impact of war trauma on people from Central Africa where people are exposed to dreadful and horrific massacres during the armed political conflicts (Schultz, Sørensen, & Waaktaar, 2012). It has been found that victims of this kind of trauma experience major depression and general anxiety disorder. Some researchers have acknowledged the negative impact of the experience of forced migration on mental health and wellbeing, mentioning psychological distress as a major outcome for refugees and asylum seekers in South Africa (Smit & Rugunanan, 2015)

Optimism vs pessimism

The researcher found out that the respondents that are Christians are optimistic about life despite the current and past experiences. This is supported by Souri and Hasanirad (2011), who argues that religion and faith have been found as major key elements in optimism, however these authors also admitted that optimism can be moderated by the effects of traumatic life

stressors like war. Some respondents that are optimistic about their life have experienced less trauma than other respondents. However, other respondents have shown that they are pessimistic about life because they have experienced severe trauma and their current socio-economic status is very bad. They begin to question their worth, their beliefs and existence. This has been seen with one of the respondents that reported that they had thoughts of committing suicide.

“Because I was feeling like everybody is better, it’s only me who is not fine, only me who have problem. I wanted to end myself, you see the car almost killed me, I couldn’t even here it, I couldn’t see the car”

Separation and loss of partners

Eight respondents in this study reported that their husbands left them and they are struggling to raise children by themselves. The emotional wellbeing of Congolese refugees and asylum seekers is negatively affected due to loss that was caused due to migration. According to Wachter et al. (2016), forced migration due to war has resulted in loss of established support networks which include friends, relatives, spouses and important others. As illustrated in the following quotes, husbands of the respondents left them because their lives were in danger. In political conflicts men are targeted and therefore they run away fearing for their lives leaving their wives and children behind.

“The soldiers came to our house looking for him, he then ran away. I have never seen him since that day (started crying) he never called me.....”

Loss of partners resulted in female Congolese refugees and asylum seekers feeling isolated and struggling to raise children. This negatively affect their mental wellbeing as they do not have emotional support and physical support from their partners. Literature has revealed that separation and loss have a huge impact on the emotional wellbeing of the victims because of limited access to physical and emotional support (Kohli, et al., 2014). It was mentioned by 8 participants that they are struggling to raise their children because they do not have support from their partners.

“Things are hard for me papa. My husband left me alone with the kids and I don’t have anything to give them.”

In addition, the absence of partners has resulted in one of the respondents attempting to commit suicide. This shows the importance of partners/husbands in the mental wellbeing of the respondent. This is illustrated in the following quote:

“Because I was feeling like everybody are better, it’s only me who is not fine, only me who have problem. I wanted to end myself, you see the car almost killed me, I couldn’t even here it, I couldn’t see the car. It was because of the stress I had because my husband left me.”

Two participants who have partners have reported positive things about the presence of their partners. Even though they are struggling financially, they have admitted that they have both physical and emotional support from their partners. This improves their mental wellbeing as compared to those female Congolese respondents that lost or were left by their partners.

“...things also got better after I met my husband I was happy. We started helping each other to pay for things, unlike when I was alone.”

4.4.3. Forgiveness

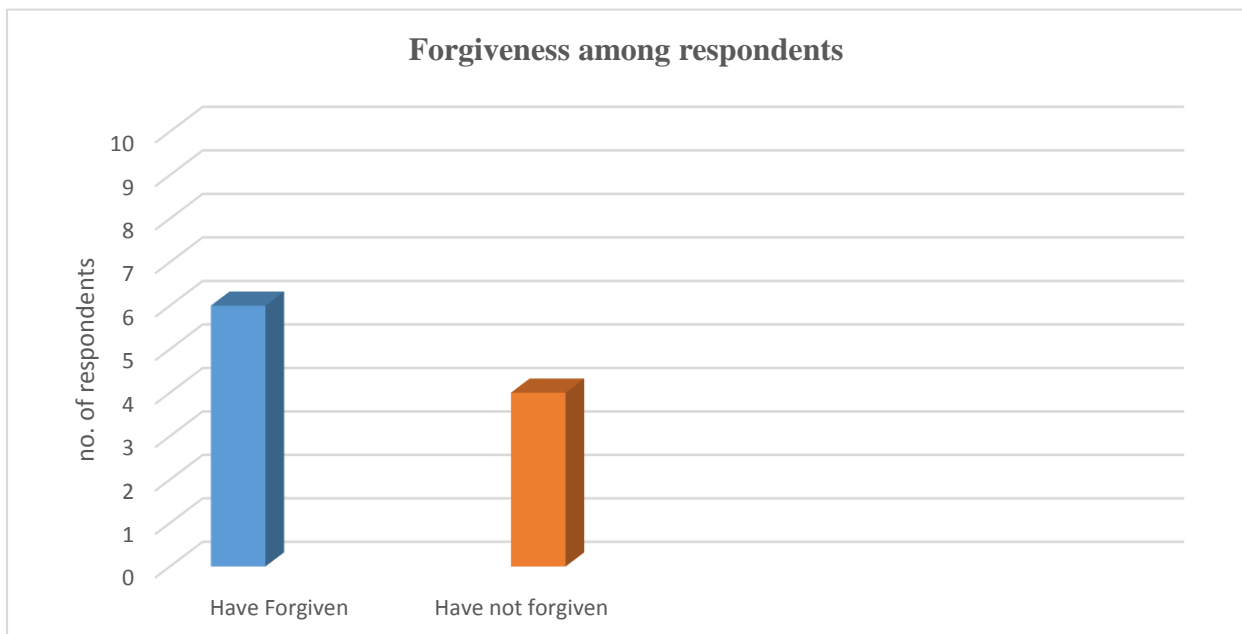


Fig 2: Pictorial representation of respondents who have forgiven and those who have not.

Christianity and forgiveness

The respondent's desire to grant forgiveness to the perpetrators (political groups in Congo) was also based on religion and/ spirituality. Majority of the respondents in this research study are Christians. They emphasised that their decision to forgive is based on their religion that encourages them to forgive. This is consistent with the study conducted by Chen et al. (2018), which suggested that people are motivated to forgive their perpetrators or offenders because of their religious faith. According to Staub (2013) forgiveness is as deeply held value in the Christian community. The participants of this study reported that there is nothing they can do to the perpetrators except forgiving them and leaving it to God for Him to pass a judgement. One of the participants also reflected that she even pray to God for Him to forgive the perpetrators. This is illustrated in the quotes below:

"I am Christian and I pray to God to forgive them. I have forgiven them."

Analysis of the findings regarding forgiveness has shown that participants who are Christians have improved mental wellbeing than those who did not mention their religions. Even though forgiveness is emphasised more in religious context, it has been found to be a pathway that links religiousness/spirituality to mental wellbeing (Chen et al., 2018). Also it has been recorded that respondents that are Christians are optimistic, do not have feeling of anger and revenge and their Christian faith helps them to cope better with the trauma they have experienced in Congo.

"I really took time to forgive and I realised I was holding my life, holding myself in that situation to move on. The only secret to move on, you have to forgive. I was so emotional, even if I talk to someone suddenly I will be pissed off. I didn't know what the problem was but I found out like I was keeping things in my heart that made me like to talk about those things... to talk to God and then to go to church to see a pastor then I started to realise like things started to change."

These findings shows a correlation between Christianity, forgiveness and optimism. As discussed in the previous section, Souril and Hasanirad (2011) argues that forgiveness is one of the key elements rooted in religion which results in optimism and resilience. In addition, a study that was done by Segerstrom, Carver, and Scheier (2017) shows that optimism and resilience promotes the psychological wellbeing of individuals especially victims of trauma.

Trauma exposure and forgiveness

Responses from the participants shows that direct exposure to traumatic events during armed conflict influences the participant's desire to forgive. Participants who were tortured, raped, kidnapped and/ witnessed their loved ones being murdered reported that they are finding it difficult because of the level of trauma they experienced. These participants also reported negative emotions like feelings of anger, depression, anxiety and despair. Worthington and Aten (2010) further state that the magnitude of trauma is found to be inversely proportional to forgiveness leading to delayed negative emotions toward a person who has transgressed personal boundaries. Even though participants would like to forget the hurtful past experience, some participants reported that they still experience nightmares and recurring thoughts about the murders, gang rapes, torture and abductions they witnessed by both the state forces and rebel groups in Congo. This traumatic experience makes it difficult for the participants to easily forgive.

“NO! I will never forgive them because what they did destroyed my life and my family's life. Look now my parents are dead, my husband is gone maybe they killed him too. My life is difficult because of them. I will never forgive them. Maybe one day I will but now I'm still feeling the pain because they finished me. Since I left Congo I am not happy. I am always sad and life is getting hard and hard every day.”

Despite the positive impact of forgiveness on the mental wellbeing of political violence victims (Worthington & Cowden, 2017), Heintzelman, Murdock, Krycak & Seay (2014) argues that forgiveness among victims of political violence is moderated by the level of trauma experienced. This body of literature confirms with the current study's findings which shows that some participants are finding it difficult to forgive the state forces and rebels because of the level of trauma they experienced.

Current Socio-economic status and forgiveness

Responses from the participants shows a correlation between participant's current socio-economic status and forgiveness. Some participants reported that they are finding it difficult to survive since they arrived in South Africa due to the high cost of living they cannot afford. Most participants mentioned that they are struggling to provide basic necessities which include food, accommodation and school fees. To provide basic necessities some participants engage in various informal work, hawking and petty trading. Some are even struggling to find work to do to provide for their families. Failure in dealing with daily hardships has an impact on the

mental wellbeing of some participants leading them to always think about the reason why they left their home country. Most participants were single mothers and they reported that they are always depressed because they are struggling to provide for their children. This has influenced them to find it difficult to forgive state forces and rebels in Congo that have forced them to come to South Africa where they are suffering.

“NO! I will never forgive them because what they did destroyed my life and my family’s life. My life is difficult because of them. I will never forgive them. I’m still feeling the pain because they finished me. Since I left Congo I am not happy. I am always sad and life is getting hard and hard every day.”

On the other hand, some participants that are living with their partners/husbands found it not difficult to forgive state forces and rebels that forced them to leave Congo. Their desire to forgive can be traced looking at their current socioeconomic status. These findings are in line with the results of a study done by Doran, Kalayjian, Toussaint and DeMucci (2012), which reported that the willingness to forgive was more highly associated with people experiencing low stress due to their socio-economic status. Two of the participants stated that life is better compared to their fellow female Congolese because they have partners who provide emotional and practical support such as paying rent, food and paying school fees for the children. Despite the challenges they face these participants stated that it is better when you have a partner and this contributes to their desire to forgive and accept their reality.

“...things also got better after I met my husband. We started helping each other to pay for things, unlike when I was alone. My husband was working as a security guard...”

Consistent with the findings reported by Krause (2010), which reveals that the emotional and practical support received by victims is important in making them forgive the perpetrators. This calls for the need for social work services where victims of trauma are provided with emotional and practical support which aid in their healing from the trauma experienced.

4.4.4. Need for social work services

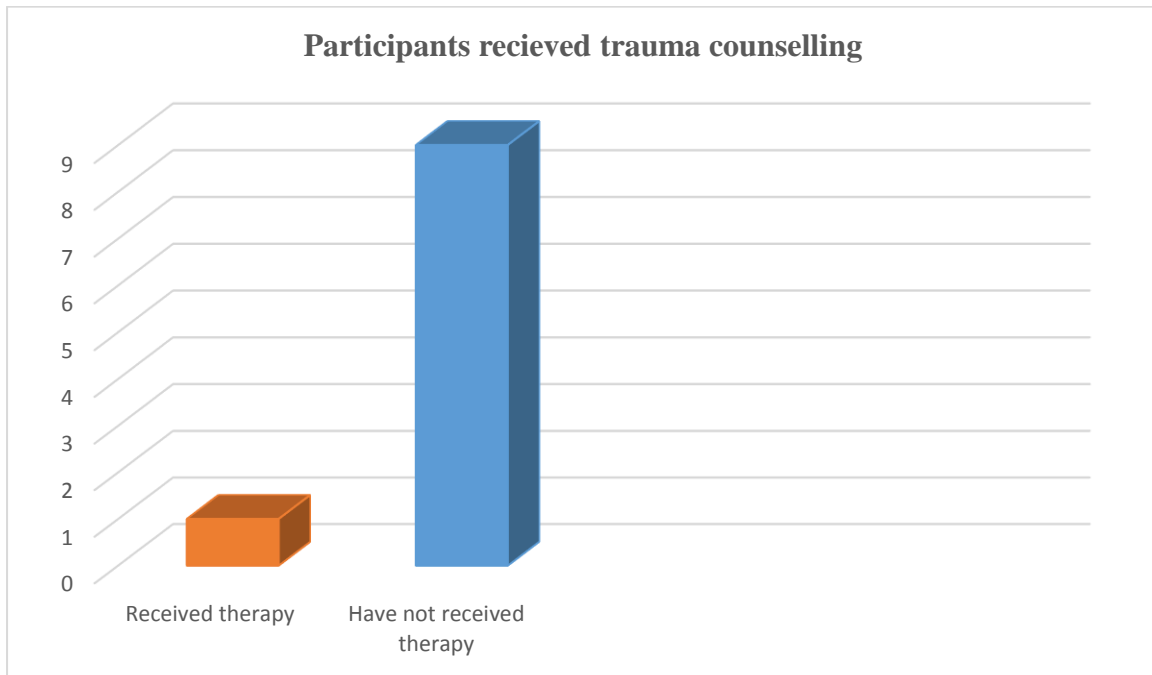


Figure 3: Graphic representation of participants who have received trauma counselling.

Trauma counselling

Despite the trauma that the respondents have experienced, only one out of ten has accessed trauma counselling services when they came to South Africa seeking for refugee. Respondents that have not received counselling reported that they did not know where to find social workers or psychologists for counselling. This shows that majority of Congolese refugees and asylum seekers do not have access to information about trauma counselling services that are available in the areas they reside. Most of the participants mentioned that they were focusing on looking for jobs and trying to integrate into the society. This shows that counselling was not a priority to them. This is illustrated in the following quotes:

“When I got here, the people I was staying didn’t tell me anything about social workers, so I didn’t know about them.”

“No!!! I didn’t see any. I did not know about them. I was focusing on looking for my husband”

The one participant that went for trauma counselling reported that her mental wellbeing improved after receiving counselling from a social worker. This is in line with the study done by Wade et al. (2014) which showed that forgiveness interventions in therapeutic counselling

enable individuals to cope with the stresses of life which result in less depression and less anxiety. During trauma counselling, the social worker encouraged the participant to consider forgiving and the participant's mental wellbeing improved after forgiving. This is illustrated in the following quote:

Yeah I did that.... I was so stressed eish (shaking head) I had no hope. Then they showed me a social worker somewhere by Bertrams there, that's the place I went to see the social worker...I was so stressed that's why they showed me a social worker that side. After I talked to the social worker I began to feel better but before I couldn't forgive him. If something happens to me I was blaming. Now I have forgiven him."

Five participants actually indicated that they do not know what are social workers or psychologists and the services they provide. However the analysis shows that all participants are knowledgeable about some non-governmental organisations (NGOs) that provides financial and practical assistance like food parcels. This shows that the mental wellbeing of Congolese refugees and asylum seekers is not being prioritised. The highest priority is only given to the practical needs of the participants. This also shows that refugees and asylum seekers have limited access to information about the trauma counselling services they can utilise. In line with research, it has been found that practical needs of refugees and asylum seekers are prioritised more than their mental wellbeing needs (Zepinic, Bogic, & Priebe, 2012). As a result the emotional and psychological needs of refugees and asylum seekers are not addressed. This expose the need to for social workers to create awareness about the importance of trauma counselling and the need to do more research about the mental wellbeing issues of refugees and asylum seekers in South Africa.

The importance of forgiveness on mental wellbeing

Participants who have managed to forgive have witnessed positive changes in terms of their mental wellbeing. Responses of the participants who have managed to forgive shows that they managed to let go negative emotions and feelings of revenge that lead to serious mental wellbeing implications. This resulted in reduced trauma related stress and anxiety among participants. This is in line with a study that was done by Doran, Kalayjian, Toussaint and DeMucci (2012), which reported that low trauma related stress was recorded among participants that were willing to forgive than those that had feelings of revenge. Forgiveness have led participants to let go the past and become optimistic about life. Two participants have reported that prior to forgiving they were experiencing anxiety, depression, irritability and they

had thoughts of committing suicide. These participants added on saying that after forgiving they started feeling better and became positive about life. They realised unforgiveness was making them feel depressed, angry and anxious. This demonstrates that forgiveness promotes mental wellbeing among victims of trauma. According to previous studies, forgiveness often improves mental wellbeing by reducing depression, anxiety, anger, rumination, obsession, and stress (Toussaint, Worthington, & Williams, 2015). To show the benefits of forgiveness in therapeutic counselling, one of the participants stated that:

“Yeah I did that.... I was so stressed eish (shaking head) I had no hope. Then they showed me a social worker somewhere by Bertrams there, that’s the place I went to see them...I was very stressed that’s why they showed me a social worker that side who encouraged me to forgive. After I talked to the social worker I began to feel better, but before I couldn’t forgive him. If something happens to me I was blaming. Now I have forgiven him.”

Analysis shows that most of the participants that were not willing to forgive were still experiencing anxiety, stress and they are pessimistic about life. These participants still show strong negative emotions like anger, hostility, hatred and vengeance. As argued by Enright (2015), it is evident that the participants in this study who were still angry and finding it difficult to forgive, are bound or remain chained towards their hurtful past that they experienced and they remain emotionally affected much more than the perpetrators/offenders (states forces and rebels). This is evident in one of the participants’ responses who reported that she will never forgive:

“Sometimes I think about it I cry and my children will be telling me not to cry. Imagine your parents being killed like a chicken whilst you are watching. It stresses me every day. I am always wishing if my parents were alive. You know I can’t even tell anyone this story because that’s how painful it is. I was thinking of killing myself but I thought of my children because they will not have a parent if I kill myself.”

The above statement shows that unforgiveness is associated with dangerous emotions. Like what Nelson Mandela once said that the negative feeling that is associated with unforgiveness is similar to drinking poison and expect your enemy to die (Tutu, 2012). This means that if victims of political violence remain angry and are unwilling to forgive, they will always be tied towards their hurtful traumatic past and will always be emotionally affected more than the offender (Enright, 2015).

4.4.5. Survival strategies of Congolese refugees and asylum seekers

Precarious employment

This is a form of insecure employment that consists of atypical work contracts, low or no social benefits, low salary, poor working conditions, high risk of unemployment, high job insecurity, high risks of ill- health, low job tenure (Barchiesi, 2011). This form of employment is characterised by less opportunity for training and education, career progression and social representation (Vosko, 2010). Most of the participants reported that they get income through precarious work which include domestic work, guarding cars, cleaning shops and selling in the streets. According to Smit and Rugunanan (2015), Congolese women experience challenging daily life forces that leave with no choice but to fall into precarious work in order for them to survive. This theme is linked to lack of documents that will be discussed later in this session which explain the reason why participants are not able to retain full-time employment due to lack of proper documentation. Responses from the respondents shows that they are not happy about the work they do because the income is very low whilst the cost of living is very high. Responses of the participants indicated that the work they do does not pay them enough and hence they are finding it difficult to pay rent, buy food and pay for school fees.

“My husband is doing the security guard job but that job they pay him R2500 and with that money he can take R2000 to pay the rent but with other R500 how can we pay the school fees? How can we buy food? Everything is very difficult and I am also not working.”

Some participants complained further stating that things are even getting worse where most people are being dismissed at work which shows that there is no job security.

“I was doing like working and I was selling in the shop there by bruma street but that Chinese shop was closed and then now I am selling there at rocky street. I sell second hand clothes.”

Aid from non-governmental organisations (NGOs) and the government

Five participants in this study reported that they survive on aid they get from NGOs. Even though it is not adequate, participants found it helpful and stated that it is better than nothing. The aid they receive include food parcels, school uniforms and fees and skills training. According to Langford et al. (2013), NGOs play a significant role in assisting Congolese refugees and asylum seekers to establish sustainable livelihoods in South Africa. The other

participant also mentioned that they get a grant from the South Africa Social Security Agency (SASA). This grant helps them to pay rent, buy food and cover other household expenses. The participant's responses shows that the aid that they get from the government and NGOs helps in covering household expenses.

“No... no one is working at home. We are renting a room, my grandmother is getting help from SASA grants. That's the money we use to pay rent. I also sometimes buy small things and sell them. Some other people who have a good heart can give me something. That's how we are surviving.”

Some participants complained that the aid they are getting from NGOs is not enough. Due to lack of funding, NGOs are only providing aid for a short period of time and this will leave the beneficiaries suffering as they were depending on the aid alone. One of the respondents stated that:

“Last year I came to Refugee Children's Project (RCP) for food and uniforms, they gave me food parcels for 3 months and also bought uniforms and books for my kids. Since they stopped giving us food, we have been struggling again, life is difficult.”

Social networks

Social networks are defined as important ties that people form with various people and institutions which provide some form of financial, social and political support that aid in social development of people (Vertovec, 2017). The participants' responses revealed that social networks play an important role in the lives of Congolese refugees and asylum seekers. Most participants have reported that the social connections they have helped them to survive both when they were still back home and when they got to South Africa. Participants revealed that they received social and financial support from friends, family, church members, NGOs and other Congolese citizens. It was revealed that when participants came to South Africa they did not know anyone and they did not have accommodation or any means of generating income to secure accommodation. This is in line with the study done by Erdal and Oeppen (2013) that reported that many refugees and asylum seekers depend on the support of religious groups, government, NGOs, friends and relatives. It is through social connections where participants got support from their friends and other church organisations. One participant reported that they were provided with accommodation at a church until they found a job to secure their own accommodation. It is clear that social networks are important especially to the Congolese refugees and asylum seekers because they need financial and social support when they get to

South Africa because most of them come with nothing. This theme was captured in one of the respondent's responses as:

“We lived in a church in Berea. Some people showed us there and we went there. People at the church stayed with us for 6 months. We were staying at the cottages there and they were also providing us with food as well..... So what we did, someone from the church found me a job in Brayston but that job was to stay there but I told them with this condition (8 months pregnant) I can't work that what I said. And they said no, if you can't work then be here and they took now my twin sister, she is the one now who went to work there me and I remained there at the church with the kids. So I remained there so she (twin sister) was coming only weekends to see the kids. She will come Saturday morning and go back Monday morning. That's how we started living slowly slowly until now when we found our own place to stay.”

In relation to the importance of social networks, previous studies have found that social connections/networks reduce physical and emotional problems among refugees and asylum seekers (Quinn, 2014). It is argued that people who have functioning social networks are less likely to experience physical and emotional problems and this results improved mental wellbeing.

Rely on partners

In addition to social networks, some participants' responses showed the vital role that their partners play on their overall wellbeing. On the other hand participants that were left with their husbands back home expressed that they wish if their partners were here with them because they need their support. Analysis of responses shows that participants that are living with their partners have a relatively better socio-economic status than those who are single mothers. This is an important theme as it is also evident that participants who have partners/husbands have a positive state of mental wellbeing (psychological and emotional health). These findings concur with the study done by Quinn (2014), which highlighted that refugees living with their partners/husbands are more likely to be mentally healthy because they are more likely to get emotional and physical support. All the participants in this study were females and those who live with their husbands reported that they are at least grateful that they their husbands are contributing to the family's income which helps to pay rent, food, school fees and other household expenses. Relying on partner's support is seen by the participants as a key component of surviving in South Africa.

“...things also got better after I met my husband. We started helping each other to pay for things, unlike when I was alone. My husband was working as a security guard.”

4.4.6. Challenges faced by Congolese refugees

Documentation

According to the participants, documentation is the most pressing need for Congolese refugees and asylum seekers. Participants reported that lack of proper documentation is affecting their lives badly because they are struggling to access employment because of lack of proper documents. According to Smit and Rugunanana (2015), refugees and asylum seekers find it difficult to retain full-time employment because of lack of legal documents. Congolese refugees and asylum seekers battle to obtain asylum seeker and refugee permits.

Nine participants have reported that they are having challenges to obtain birth certificates of their children and some of them cannot go to school because they do not have birth certificates. This has resulted in increased stress among participants who are mothers because they are worried about the future of their children as they are not in school due to lack of documents (birth certificates). To show difficulty in obtaining birth certificates for children, one participant commented:

“And also my child doesn’t have a birth certificate. I went to Home Affairs and they are not doing anything. Imagine I walk to Home Affairs with the baby on my back and every time I go there they say check my asylum and say they will do it. It is just tough.”

Participants have also complained about the treatment they get from the department of home affairs where they wait long periods to receive their permits. Some respondents reported that the application process is very long and they asked to always renew their asylum after every six months.

“Even with home affairs I am not a refugee in South Africa, I have only asylum and I have to renew it after every 6 months. Till today they there’s no answer about my refugee status application.”

Difficulty in obtaining refugees status has a negative impact on the lives of Congolese refugees and asylum seekers when it comes to employment opportunities and accessing other resources like social grants. One of the respondents reported that she had challenges when she was

looking for a job because the employers could not understand her documents. This makes it difficult to secure employment when employers are finding it difficult to employ refugees and asylum seekers because of the nature of their documents.

“I was supposed to sign a contract, it was so difficult for me to show my papers (asylum seeker document) I was saying asylum when they were calling a permit.”

In addition to finding it difficult to secure employment, some participants indicated that they feel incomplete because they do not have documents. One of the participants stated that she does not receive the same respect/and treatment here in South Africa compared to back home simply because she does not have documents. The analysis shows that this experience has led Congolese refugees and asylum seekers to experience psychological distress because they feel like they do not have an identity. This is illustrated in the following responses:

“You know my brother it is painful to come from Congo where you were living a good life and being respected and come here where I have nothing, I am treated like dog, I don’t even have papers. It is very painful...I am refugee who came for my people to save me but my own people are rejecting me”

“Even with home affairs I am not a refugee in South Africa, I have only asylum and I have renew it after every 6 months. Till today they there’s no answer about my refugee status application.”

Deplorable living conditions

Accommodation is a serious concern for Congolese refugees and asylum seekers. All ten participants have complained about high rentals they are charged whilst their household income is very low. Some participants reported that they are renting out some space in their flats so that they will be able to pay rent for the whole flat. This will result in participants sharing a room with other families leading to overcrowding and lack of privacy (Smit & Rugunan, 2015). This living arrangement is a serious concern as it has a negative impact on the children growing up in this setting. One of the participants described how her family’s income is very little compared to the household expenses which include rent, food and school fees.

“It is really difficult my brother. It is a problem to even pay rent. You know I even put the people so that they pay money, me I stay in the sitting room. So I have a flat so I put people to rent the bedrooms and I stay in the sitting room, that’s how we pay rent. We collect money from the people who rent the bedrooms and we combine it to pay rent.

Sometimes it is difficult to find food to eat, when we find food we eat and when we don't we just sit. You know when my husband was working it was ok but now he is now working things are very tough."

In addition to accommodation as a serious issue, participants have also reported that their living conditions in general are very bad. Respondents that are mothers have revealed that they are finding it difficult to provide for their children's needs which include food, school fees and their clothing. On top of their traumatic past, participants reported that life is getting harder here in South Africa where they were expecting to get a better living.

"Things have been hard for us, I cannot even find a proper job, I do piece jobs and the money I get is not enough. I am staying with friends because I can't afford to pay for my own room. And I still have to bring money for rent because we share the room. You know my brother, getting a job as a foreigner is very difficult because they don't want us here. I only survive on washing clothes for people and they give low money like 20 rand or 50 rand if you are lucky. It is difficult for me to even pay fees for my children. They are all not going to school because I don't have money. If my husband was here with me it was going to be better."

Social Exclusion

In this study, social exclusion refers to being marginalised or discriminated against based on nationality (Hynes, 2011). This involves lack of entitlement to social economic basic needs like employment, social services including education and health care (Hynes, 2011). Participants have reported that they experienced discrimination when it comes to finding employment and also when accessing social services from government departments. One of the participants reported that she was being ill-treated and was dismissed several times because she is a foreigner. As argued by Smit and Rugunanan (2015), this shows that foreign nationals lack entitlement to employment in both informal and formal sectors. Another participant also reported that she was ill-treated by the employees at Ikhaya Lethemba, which is an organisation that she was staying with her children because she was found to be in need of care and protection because there were people who wanted to kill her. This participant revealed that she was ill-treated by the employees because she is a foreigner and she was told that she does not deserve to be there. Because of this form of discrimination, the participant ended up leaving the shelter to sleep in a corridor in one of the flats in Yeoville. This shows how foreign national

are being socially excluded from accessing social services they need for survival. This is illustrated in the following quote:

“Then I went to The Centre for the Study of Violence and Reconciliation (CSV) to seek for protection. CSV send me to Ikhaya Lethemba for shelter and protection. That’s how I got to Ikhaya Lethemba. You know at the shelter they were treating us so bad. The sisters would shout at us, telling us that we should go back to our country, why are we here. Me and my children couldn’t survive. It was so bad. And they told us that we were going to stay there for 3 months and after 3 months they told us to leave. They refused to let us live longer whilst we still looking for a place to stay whilst others were staying.”

Abuse and exploitation

In the context of this study, exploitation involves practices that include ‘voluntary’ exploitation which is accepted by the participants (Lewis & Dwyer, 2014). The exploitation that these participants experienced take different forms. Two participants reported unfair treatment they received at their work places. One of the participant revealed that the manager of the company she was working for wanted to have sex with her and she refused. The participant was demoted from a cashier to a cleaner because she refused to sleep with her boss and the boss started ill-treating after that incident. This is shown in the following quote:

“...I felt so so bad like a white men who was a manager he demoted me because he wanted to sleep with me and then what happened Uhmmm...when I started working I was on the till with his wife. How can I feel? I am at the till, his wife is training me and then his husband want me to sleep with me because he is a supervisor there and suddenly when I refuse it, he demoted me from the till point to the cleaner.....”

Exploitation is also witnessed in the domestic work that some of the participants do. Three of the participants revealed that they get little money after working so hard, however they are still grateful that they are getting something for a living. Respondents reported that they get R20 to R50 rand after washing clothes for the whole family, cleaning the house and the backyard. The money these people are getting is not equivalent to the amount of work they do, this is a form of exploitation. One of the respondent stated that:

I only survive on washing clothes for people and they give low money like 20 rand or 50 rand if you are lucky and we do hard work but they still give us low money like that,

anyway what can we do? Nothing, we just accept. It is difficult for me to even pay fees for my children. They are all not going to school because I don't have money. If my husband was here with me it was going to be better."

In addition to exploitation, three participants revealed that they were sexually abused back home and also when they were on their way to South Africa. Two participants told that they were raped by soldiers when they were still in Congo. This was very traumatic for them and this affected their psychological and emotional wellbeing. One of the participants who was raped by the soldiers said she is always anxious and feels uncomfortable when she is around men. The other participant reported that she had to have sex with the truck driver as a form of payment for her to be transported from Congo to South Africa. Literature has shown that most female refugees from the Central Africa have to sleep with truck drivers for them to get free transport from their home country to South Africa (Chireshe, 2010). This sub-theme is illustrated in the following response:

"The driver asked me to have sex with me and told me that if I don't have sex with him he was going to leave me at the border. The driver also said that he can leave me and take another women that will agree to sleep with him.....(silence)... so I had to sleep with him because.... What was I going to do with my children at the border because we didn't have passports, we were just hiding inside the truck so that they don't see us at the border."

"On the same day they (rebells) killed my parents, they also raped me. Those people are heartless and they wanted us to suffer and they were happy."

4.5. Conclusion

This chapter has presented the data that was generated from ten participants who are female Congolese refugees and asylum seekers. Several themes were identified which include the causes of migration, forgiveness, the need for social work services, survival strategies of Congolese refugees and asylum seekers, and the challenges they face in South Africa. Results from this study shows that the political conflicts has negatively affected their mental wellbeing. The results have also shown the importance of forgiveness and the need for social work services to improve the mental wellbeing of the participants who are victims of trauma. Finally this chapter has provided the survival strategies of Congolese and asylum seekers and the challenges they face in South Africa. The next chapter will provide the interpretation of the findings and the research literature relevant to the study.

CHAPTER FIVE

DISCUSSION OF MAIN FINDINGS

5.1. Introduction

This study was set out to understand the role forgiveness plays on mental well-being interventions among Congolese refugees and asylum seekers. This study also considered the factors that led the participants to migrate and their survival strategies in South Africa. The participants were female Congolese refugees and asylum seekers living in Yeoville, who have been staying in South Africa for five years or less. The focal point of this discussion will be on the themes that emerged from the interviews.

5.2. Discussion of main findings

Factors that led Congolese refugees and asylum seekers to migrate out of Congo

The findings of this study revealed that Congolese refugees and asylum seekers migrated out of Congo because of two main reasons. Firstly, most participants came migrated out of Congo because political conflicts/war between state forces and the rebels. They left Congo for South Africa because their lives were in danger, participants revealed that they were threatened, tortured and sexually abused by the state forces and rebels. These traumatic experiences forced them to have no choice but to leave the country and seek refuge. The UNHCR (2016) reported that 490 000 persons originating from Congo were forced to seek refuge in other countries due to political violence happening in the country. Congo has been experiencing an ongoing cycle of war and violence for two decades now since late 90s (Ainamani, Elbert, Olema, & Hecker, 2017). The other reason that led some of the participants to migrate out of Congo was that they were following their husbands. Because men are targeted during political conflicts (Christian, et al., 2011), they had to run away and their wives had to follow them to keep their marriage and also to be safe from the political conflicts.

The effect of political conflicts on the mental wellbeing of Congolese refugees and asylum seekers

There were different effects that were expressed by the participants. The major effect that participants reported is that the political conflicts in Congo have affected their mental wellbeing. The analysis of the results shows that due to horrific atrocities they were exposed to in their home country, the participants are suffering from trauma related stress, anxiety and

depression. Previous studies has also shown that most refugees and asylum seekers have been found to be suffering from post-traumatic stress disorder (PTSD), anxiety and depression (Fazel, Reed, Panter-Brick, & Stein, 2012).

The results of this study showed that some participants are optimistic and some pessimistic about life after experiencing traumatic atrocities back home. Respondents that are pessimistic about life reported that they have experienced severe trauma than others and their current economic status is also very bad. The existing literature does not seem to reflect on why refugees and asylum seeker are pessimistic about life. However, the analysis of this study shows that high levels of trauma and poor current socio-economic status influences an individual to be pessimistic. On the other hand the findings shows that respondents who are Christians are optimistic about their lives despite their current socio-economic status and past experiences. This is line with the emerging literature which suggests that religion and faith are major key elements in optimism (Souri & Hasanirad, 2011). However, the results of this study also indicate that optimism can be moderated by the effects of traumatic life stressors and current socio-economic status despite one's religious faith.

Lastly it has been found that political conflicts have led participants to lose their partners/husbands. 70% of the participants reported that their husbands left them because their lives were in danger. This has negatively affected the mental wellbeing of the participants because they do not have emotional and physical support they need from their partners. Literature has revealed that separation and loss have a huge impact on the emotional wellbeing of the victims because of limited access to physical and emotional support (Kohli, et al., 2014). This shows that there is need to put more attention on the mental wellbeing of female refugees and asylum seekers especially single mothers because they lack emotional support from partners and most of them feel isolated. 20% of the participants that live with their partners have reported positively about the presence of their partners and this contributes to the improvement of their overall mental wellbeing. These findings concur with the study done by Quinn (2014), which highlighted that female refugees and asylum seekers living with their partners/husbands are more likely to be mentally healthy because they are likely to get emotional and physical support.

Forgiveness

The results shows that 60% of the participants have forgiven and 40% have not forgiven. The participants' desire to forgive was influenced by several factors which include religion, level

of trauma experienced and current socio-economic status. Christians reported that they granted forgiveness because of their religious faith. This is consistent with the study conducted by Chen et al. (2018), which suggested that people are motivated to forgive their perpetrators or offenders because of their religious faith. The analysis has also shown that most of the Christians that have forgiven reported that their mental wellbeing was improved after forgiving and they are optimistic in their lives. As argued by Chen et al. (2018), this shows that the forgiveness that is emphasised more in religious contexts, is a pathway that links religiousness/spirituality to mental wellbeing.

Findings from the participants also shows that those who experienced severe trauma during the armed conflict were not willing to forgive. This is because of the level of trauma that they experienced which makes them find it difficult to forgive. Some participants were tortured, raped, kidnapped and witnessed their loved ones being killed. The analysis of the results also shows that most of these participants are still suffering from mental wellbeing problems. These participants reported negative emotions like feelings of anger, depression, anxiety and despair. According to Worthington and Aten (2010), the magnitude of trauma experienced is found to be inversely proportional to forgiveness leading to delayed negative emotions toward a person who has transgressed personal boundaries. However, some participants who experienced less trauma were able to forgive. Despite the positive impact of forgiveness on the mental wellbeing of political violence victims (Worthington & Cowden, 2017), Heintzleman, Murdock, Krycak & Seay (2014) argues that forgiveness among victims of political violence is moderated by the level of trauma experienced. This shows that one need to consider the level of trauma experienced in order to understand the reasons why refugees and asylum seekers sometimes find it difficult to forgive.

Finally this study has shown that the willingness to forgive is also influenced by the current socio-economic status of the participants. Participants that have a very low socio-economic status found it difficult to forgive because they are struggling which increases their anger towards the state forces and rebels that made them to leave the country where life was better for them. Due to the increasing cost of living in South Africa, the participants always think about the life they had back home and these thoughts makes forgiving difficult. On the other hand participants who are living a relatively better life have managed to forgive because they are at least able to afford the basic necessities. These findings are in line with the results of a study done by Doran, Kalayjian, Toussaint and DeMucci (2012), which reported that the willingness to forgive is more highly associated with people experiencing low stress due to

their socio-economic status. This shows the need for social work services to uplift the livelihoods of refugees and asylum seekers so that they will be able to forgive and their mental wellbeing will be improved.

Need for social work services

The findings of the study shows that there is need to prioritise the mental wellbeing of refugees and asylum seekers through psychosocial support. 80% of the participants have experienced severe trauma and this has affected their mental wellbeing. Out of 10 participants only one received therapeutic counselling. This is concerning because most of the participants were exposed to traumatic events during armed conflicts and this include being tortured, raped, kidnapped and witnessing their loved ones being murdered. After experiencing this kind of trauma, it is argued that one need to go for therapeutic counselling. Due to the trauma experienced most participants experience panic attacks, anxiety, and stress/depression. According to Smit and Rugunanan (2015), forced migration due to war conflicts has a negative impact on mental wellbeing of refugees and asylum seekers with psychological distress as a major outcome. This shows the need to address the mental wellbeing of refugees and asylum seekers.

One participant that went for counselling when she got to South Africa reported that her mental wellbeing improved after receiving therapeutic counselling from a social worker. The concept of forgiveness was incorporated in the counselling that the participant received which was helpful in helping the client let go negative emotions that were associated with unforgiveness. This narrative demonstrate that the concept of forgiveness can be used as an intervention during therapy. After receiving this counselling, the respondent reported positive mental health results such as reduced stress, less anxiety, resilience and optimism. Studies done by Wade et al., (2014) showed that forgiveness interventions enable individuals to cope with the stresses of life which result in less depression and less anxiety. Using the strength based approach incorporating forgiveness in therapeutic interventions promotes resilience by unsticking individuals from forgiveness and by easing spiritual struggle. According to the positive psychology theory, forgiveness is one of individuals' strengths that helps to achieve positive mental wellbeing by focusing on the positive side of human experience (Hojjat & Ayotte, 2013).

50% of the participants indicated that they do not know what are social workers and the services they provide. This shows that there is need to create an awareness about the mental wellbeing

of Congolese refugees and asylum seekers. Also there is need to make refugees and asylum seekers aware of the social work services that available for them that promote their mental wellbeing. The findings shows most participants are aware of the NGOs that provide financial and practical assistance such as food parcels, school uniforms, school fees and skills training. This shows that the highest priority is only given to practical needs of refugees and asylum seekers, neglecting their mental wellbeing. In line with research, it has been found that practical needs of refugees and asylum seekers are prioritised more that their mental wellbeing needs (Zepinic, Bogic, & Priebe, 2012).

Lastly on the need for social work services it has been found that forgiveness can be used as one of the social work mental wellbeing interventions among refugees and asylum seekers who are victims of political conflicts. 60% of the participants revealed that they managed to forgive and it was noticed that their mental wellbeing is improved than those who were not willing to forgive. Reduced trauma related stress and anxiety was recorded among participants who managed to forgive. Two participants have reported that prior to forgiving they were experiencing anxiety, depressions, irritability and they had thoughts of committing suicide. This shows that forgiveness can be used as a social work intervention in therapy for refugees and asylum seekers. According to previous studies, forgiveness often improves mental wellbeing by reducing depression, anxiety, anger, rumination, obsession, and stress (Toussaint, Worthington, & Williams , 2015). This study also revealed that forgiveness has led participants to let go the past and become optimistic about life. According to Conversano et al. (2010), optimism is very important in therapeutic counselling because it improves mental health as well as coping with social and working life.

Survival strategies of Congolese refugees and asylum seekers

Generally, findings indicate that most participants survive by doing precarious work, humanitarian aid, and relying on social networks and/ partners. Precarious employment has been found to be the only form of employment left for refugees and asylum seekers. This form of work is characterised by low or no social benefits, low salary, poor working conditions, high job insecurity, and high risks of ill-health (Barchiesi, 2011). All the participants of this study were females and they reported the work they do include domestic work, cleaning shops and selling in the streets. Participants complained that the work they does not pay them money that is enough to pay for household expenses and most of them are single mothers. These mothers are struggling to pay rent, buy food, school fees and other household expenses. According to

Smit and Rugunanan (2015), Congolese women experience challenging daily life forces that leave with no choice but to fall into precarious work in order for them to survive.

Majority of participants reported that they receive support from a variety of social networks. To survive in South Africa, participants have created social connections which are helping them to survive through social and emotional support. Participants revealed that they received social and financial support from friends, family members, partners, church members, government, NGOs and other Congolese citizens. It was revealed that when participants came to South Africa they did not know anyone and they did not have accommodation or any means of generating income to secure accommodation. This is in line with the study done by Erdal and Oeppen (2013) that reported that many refugees and asylum seekers depend on the support of religious groups, government, NGOs, friends and relatives. It is argued that people who have functioning social networks are less likely to experience physical and emotional problems and this results improved mental wellbeing (Quinn, 2014). However, even though participants reported how beneficial their social networks are in their lives, they also highlighted that the support is not enough due to the ever increasing cost of living in Johannesburg.

The analysis of the need for support networks for refugees and asylum seekers shows the need for social workers to provide psychosocial support to refugees and asylum seekers who do not have support structures. This is an important factor as it is also evident that participants with functional support structures like partners for instance, have a positive state of mental wellbeing (psychological and emotional health). These findings concur with the study done by Quinn (2014), which highlighted that refugees with functional support structures are more likely to be mentally healthy because they are likely to get emotional and physical support.

Challenges faced by Congolese refugees and asylum seekers

A number of challenges have been raised by participants which include lack of documents, deplorable living conditions, social exclusion, abuse and exploitation. All participants have reported that lack of documents is the most pressing need among Congolese refugees and asylum seekers. This is a serious concern, it is negatively affecting their lives badly because they are struggling to access employment because of lack of proper documents. According to Smit and Rugunanan (2015), refugees and asylum seekers find it difficult to retain full-time employment because of lack of legal documents. Congolese refugees and asylum seekers battle to obtain asylum seeker and refugee permits. They are also struggling to obtain birth certificates of their children and some of them cannot go to school because they do not have documents.

Difficulty in obtaining refugees status has a negative impact on the lives of Congolese refugees and asylum seekers when it comes to employment opportunities and accessing other social services like social grants. Because the participants cannot secure permanent employment, they end up not being able to afford basic necessities. The results of this study revealed that most participants are struggling to pay rent and this will result in more families living in one flat. This will result in participants sharing a room with other families leading to overcrowding and lack of privacy (Smit & Rugunanan, 2015). This living arrangement is a serious concern as it has a negative impact on the children growing up in these settings. Respondents that are mothers revealed that they are finding it difficult to provide for their children's needs which include food, school fees and their clothing. On top of their traumatic past, participants reported that life is getting harder here in South Africa where they were expecting to get a better living.

Participants reported that they experience discrimination when it comes to finding employment and also when accessing social services from government departments. One of the participants reported that she was being ill-treated and was dismissed several times at work because she is a foreigner. As argued by Smit and Rugunanan (2015), this shows that foreign nationals lack entitlement to employment in both informal and formal sectors. Another participant also reported that she was ill-treated by the employees at Ikhaya Lethemba, which is an organisation that she was staying with her children because she was found to be in need of care and protection because there were people who wanted to kill her. This participant revealed that she was ill-treated by the employees because she is a foreigner and she was told that she does not deserve to be there. This expose the type of exclusion that female Congolese refugees and asylum seekers are subjected to.

The results of this study has also revealed how female Congolese are exploited in the work they do. Two participants reported unfair treatment they received from their work places. One of the participant revealed that the manager of the company she was working for wanted to have sex with her and she refused. The participant was then demoted from a cashier to a cleaner because she refused to have sex with the manager and this manager started ill-treating after that incident. Exploitation is also witnessed in the domestic work that some of the participants do. Three of the participants revealed that they get little money after working so hard, however they are still grateful that they are getting something for a living. Respondents reported that they get R20 to R50 rand after washing clothes for the whole family, cleaning the house and the backyard. The money these people are getting is not equivalent to the amount of work they do, this is a form of exploitation.

In addition to exploitation, three participants revealed that they were sexually abused in Congo and also when they were on their way to South Africa. Two participants told that they were raped by soldiers when they were still in Congo. This was very traumatic for them and this affected their psychological and emotional wellbeing. One of the participants who was raped by the soldiers said she is always anxious and feels uncomfortable when she is around men. The other participant reported that she had to have sex with the truck driver as a form of payment for her to be transported from Congo to South Africa. Literature has shown that most female refugees from Central Africa have to sleep with truck drivers for them to get free transport from their home country to South Africa (Chireshe, 2010).

5.3. Conclusion

This study was set out to understand the role forgiveness plays on mental well-being interventions among Congolese refugees and asylum seekers. The above chapter has provided a discussion of the themes that emerged from the interviews conducted. Furthermore the discussion provided an interpretation of the research findings taking into consideration the existing body of literature on the correlation between mental wellbeing and forgiveness. The next chapter will provide the conclusions of the study and recommendations.

CHAPTER SIX

CONCLUSION AND RECOMMENDATIONS

6.1. Introduction

This study explored the role of forgiveness on mental wellbeing interventions among Congolese refugees and asylum seekers. The connection between forgiveness and mental health was established. This chapter presents the summary of the findings, conclusions, recommendations for social workers in practice and directions for future research.

6.2. Conclusion of the study

This study was aimed at answering the research question: does forgiveness play a role on mental wellbeing interventions among Congolese refugees in Yeoville? To answer this question, the researcher interviewed ten female Congolese refugees and asylum seekers who have been living in South Africa for 5 years or less and were between 30 to 40 years old. This is a concluding chapter that aims at establishing whether or not this research study achieved its aim. The chapter will also establish the study's contributions to the existing body of knowledge relative to the role of forgiveness on mental wellbeing interventions and the role of social workers in forgiveness and mental wellbeing among refugees and asylum seekers. Concentrating on answering the above research question task,

- a. To explore the factors that contributed to Congolese refugees migrating out of Congo.
- b. To explore Congolese refugees' survival strategies in South Africa.
- c. To establish the role of a social worker in forgiveness and mental wellbeing among immigrants.

The study explored the role of forgiveness on mental wellbeing interventions among Congolese refugees and asylum seekers in Yeoville. The findings show that forgiveness plays an important role on mental wellbeing interventions. The participants of the study were exposed to political conflicts and that is the reason why they left Congo. These participants reported negative emotions like feelings of anger, depression, anxiety and despair because of the trauma they experienced. Participants who have forgiven the state forces and rebels reported that their mental wellbeing improved when they considered forgiving. The findings of this study highlighted that female Congolese refugees and asylum seekers in Yeoville experience mental wellbeing problems because of exposure to traumatic events back in Congo. This adds to

literature that places emphasis on the need to focus on the mental wellbeing of refugees and asylum seekers. Furthermore, existing literature has focused more on the practical needs of the refugees and asylum seekers and their mental health has been neglected. This was seen in this study where only one participant received trauma counselling and the rest did not know about social work services that they can access.

In this study forgiveness has been found to be helpful in helping the participants to heal from trauma related stress and improve their mental wellbeing. This provides evidence that forgiveness can be used as a mental wellbeing intervention when providing counselling to refugees and asylum seekers (who are victims of trauma) in South Africa. Thus social workers can use forgiveness as a therapeutic intervention when they are providing professional help to the Congolese refugees and asylum seekers who still have negative feelings (feelings of revenge) towards the state forces and rebels causing war in their home country.

However, it was also found that the willingness to forgive can be moderated by various factors including religious beliefs, current socio-economic status, availability of physical and emotional support, and the level of trauma experienced. This discovery need to be considered by social workers when incorporating forgiveness in therapy for it to be successful. For example, the social worker need to take into consideration the person's religious beliefs and assess if they promote forgiveness or not. This study also explored the participants' survival strategies and the challenges they face in South Africa. The findings shows that those who are struggling to acquire basic necessities find it difficult to forgive and have mental wellbeing problems that those who can afford. This demonstrates the need to provide psychosocial support to the refugees and asylum seekers in order for forgiveness intervention to be successful thereby promoting mental wellbeing.

6.3. Recommendations for social workers

Based on the results on this study, it is recommended that social workers consider the concept of forgiveness on mental wellbeing interventions among refugees and asylum seekers. Highlighting the interconnectedness of forgiveness and mental wellbeing, participants who have forgiven showed improved positive mental wellbeing than those who were not willing to forgive. This shows that in order to promote the mental wellbeing of refugees and asylum seekers, the concept of forgiveness need to be considered when rendering therapeutic services to the concerned population. However, the willingness to forgive can be moderated by various factors including religious beliefs, current socio-economic status, availability of physical and

emotional support, and the level of trauma experienced. Therefore, social workers need to consider these moderating factors for forgiveness to be effective in therapeutic counselling.

Participants (90%) of this study revealed that they do not know what social workers are and where to find them. This calls for social workers to create awareness about social work services to the refugees and asylum seeker population. Some participants reported that they are more concerned about their practical needs not mental wellbeing needs. This is concerning because most of the participants experienced severe trauma and they reported that they have mental wellbeing problems like stress, depression, pessimism and anxiety. To address this concern, social workers need to play a significant role in educating refugees and asylum seekers about the importance of trauma counselling and promoting their mental wellbeing.

In addition, forgiveness as a mental health intervention can be incorporated in all three social work methods which include case work, group work and community work. Case work and group work can take form of trauma counselling where service users will be encouraged to forgive and let go negative emotions associated with unforgiveness. Community work can be done through awareness campaigns, educating the refugee and asylum seeker community about the mental wellbeing benefits of forgiveness as well as social work services they can access in their communities. Interventions to promote in-depth forgiveness can be done through merely raising the awareness of forgiveness among refugee and asylum seekers, although some might perceive forgiveness differently.

6.4. Limitations of the study and directions for future research

The main limitation of this research is that male Congolese refused to be interviewed and this makes it difficult to use these findings to understand forgiveness and the mental wellbeing of males who have experienced trauma in Congo. This study only explored the mental wellbeing of female Congolese refugees and asylum seekers. Further research is needed in this regard, to also explore the role of forgiveness on mental wellbeing among male refugees and asylum seekers. Most of the female participants are the working class and there were no participants from the middle or upper class. This makes it difficult to use the results to explain the experiences of the middle and upper class Congolese refugees and asylum seekers because their survival strategies and the challenges they face are different. Future research should also include refugees and asylum seekers who are from the middle and upper class.

Future research should also include the perceptions of social workers on the role of forgiveness on mental wellbeing interventions among refugees and asylum seekers. Social workers'

contributions are needed in order to design a comprehensive model of forgiveness to improve mental wellbeing of refugees and asylum seekers. Lastly, researchers should prioritise focusing on the mental wellbeing of refugees and asylum seekers because they continuously experience trauma in their daily lives in South Africa. This is in line with argument made by Zepinic, Bogic and Priebe (2012), it is important that the mental wellbeing of refugees and asylum seekers gets more attentions as their practical needs.

6.5. Summary of the chapter

This chapter has presented the summary and conclusions of the findings which shows that forgiveness improves the mental wellbeing of Congolese refugees and asylum seekers who are victims of trauma experienced in their home country. The above chapter has also provided recommendations for social workers in practice on how they can incorporate forgiveness in mental wellbeing interventions. Finally, the chapter provided limitations of the study and directions for future research in the field of mental wellbeing and forgiveness among refugees and asylum seekers.

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APPENDIX A

PARTICIPATION INFORMATION SHEET

Good day,

My name is Pride Kandemiri and I am currently in my final year of studying Social Work at the University of the Witwatersrand. As part of the requirements for the degree, I am conducting a research regarding the role of forgiveness on mental wellbeing interventions among Congolese refugees and asylum seekers in Yeoville. It is hoped that the information gathered could assist in understanding how forgiveness can improve mental health of immigrants that were displaced from their country of origin due to political conflicts.

As a Congolese refugee or asylum seeker living in Yeoville, you are likely to contribute to my research. I therefore wish to invite you to participate in my study. If you accept my invitation, your participation will be voluntary as such you are free to withdraw at any time without any consequences. There are no personal benefits of participating in this study. If you agree to take part, I would like to arrange an interview with you at your house. The interview will last approximately one hour. If you choose to participate, you may refuse to answer any questions that you feel uncomfortable with answering. If you decide to participate, I will ask your permission to tape record the interview. No one, other than the researcher and the supervisor will have access to the tapes. All recorded data will store safely in password protected laptop and only the researcher will have access to it. A copy of the interview transcript without identifying information will be stored permanently in a locked cupboard and may be used for future research

Please be assure that your name and personal details will be kept confidential and no identifying information will be included in the final research report. The results of the research may also be used for academic purposes (including books, journals and conference proceedings) and a summary of findings will be made to you on request.

There are no foreseeable benefits or particularly risks associated with participation in this study. However should you experience any emotional distress? I will refer you to Refugee Children's Project and schedule an appointment with or ideally you can contact Mrs. Josephine Namata on 073 989 8697 or josiekam22@yahoo.com .

Please contact me on 0849739157 or pridekandemiri@gmail.com , or my supervisor, Dr. Thobeka Nkomo on thobeka.nkomo@wits.ac.za if you have any questions regarding my study. We shall answer them to the best our ability. If you have any concerns and complaints about the study, please contact **Human Research Ethics Committee (Non-medical)**: Chairperson: Jasper.Knight@wits.ac.za or administrator: Mrs Lucille Mooragan, Tel 011 717 1408 or Lucille. Mooragan@wits.ac.za .

Thank you for taking the time to consider participating in the study.

Yours sincerely,

Pride Kandemiri



APPENDIX B

Consent form for participation

Title: Exploring the role of forgiveness on mental wellbeing interventions among Congolese refugees and asylum seekers in Yeoville.

I hereby consent to participate in the research study. The purpose and procedure of the study have been explained to me.

I understand that:

- My participation in this study is voluntary and I may withdraw from the study without being disadvantaged in any way.
- I may choose not to answer any specific questions if I do not wish to do so.
- There are no foreseeable benefits or particularly risks associated with participation in this study.
- My identity will be kept strictly confidential, and any information that may identify me, will be removed from the interview transcript.
- A copy of my interview transcript without identifying information will be stored permanently in a locked cupboard and may be used for future research.
- I understand that my responses will be used in the write up for an honours project and may also be presented in conferences, book chapters, journal articles and books.

Name of Participant: _____

Date: _____

Signature: _____



APPENDIX B

Consent form for audio-taping of the interview

Title: Exploring the role of forgiveness on mental wellbeing interventions among Congolese refugees in Yeoville.

I hereby consent tape-recording of the interview.

I understand that:

- The recording will be stored in a secure location (a locked cupboard or password – protected computer) with restricted access to the researcher and the research supervisor.
- The recording will be transcribed and any information that could identify me will be removed.
- When the data analysis and write up of the research study is complete, the audio recording of the interview will be kept for two years following any publications or for six years if no publication emanate from the study.
- The transcript with all identifying information directly linked to me removed, will be stored permanently and may be used for future research.
- Direct quotes from my interview, without any information that could identify me may be cited in the research report or other write-ups of the research.

Name: _____

Date: _____

Signature: _____



APPENDIX C

INTERVIEW SCHEDULE

Identifying information of participants:

Pseudonym: _____

Age: _____

Country of origin: _____

Home language: _____

Left country of origin in (year): _____

Entered South Africa in (year): _____

1. Why did you migrate from Congo to South Africa?
2. How does the cause of migration affect your mental wellbeing?
3. Have you forgiven the political groups causing war conflicts in Congo?
4. Have you ever received counselling services when you came to South Africa?
5. What are your survival strategies in South Africa?

APPENDIX D

INTERVIEW TRANSCRIPT

P: Researcher

B: Participant

The interview process

Pride (P): Good morning!! How are you?

Bahati (B): I am fine.

P: My name is Pride Kandemiri I am doing research on mental wellbeing and forgiveness among Congolese refugees. Like what I have explained you outside your participation is voluntary and you are free to stop me if you don't want to participate anymore. I am going to ask you to sign the consent forms which serves as evidence that you have agreed to be interviewed and to be recorded. The reason why I am recording you is because I will be able to listen to what you said again and be able to write it. No one will have access to the audio recording except my supervisor. I hope you understand what I have told you now and what you read on the information sheet.

B: yes I do.

The participant signed the consent forms

P: Thank you for agreeing to be interviewed by me. We can start now. Let's begin by talking about the reason why you came to South Africa.

B: Ok *(she looked down)* I always don't want to talk about it, it's so painful.... *(Remained silent for few seconds)*....they killed my father and my mother. My father was a king... *(Started crying)* and because of the war in Congo they wanted him to die so they killed him so that they can take the land. Bemba's people wanted my father to die because he was in Kabila's political party. On the same day they killed my parents, they also raped me. Those people are heartless and they wanted us to suffer and they were happy.

P: this is a painful experience, where was your husband and your children when this was happening.

B: on that night I was with my 3 children. I don't know where my husband went. He just left during that period when all this was happening. They wanted to kill him as well so he ran away.

He did not even say good bye. I remember him telling me that we are no longer safe in this country, the rebels want us to die because we belong to Kabila.

P: Oh I see that was painful hey, so how did you travel from Congo to South Africa?

B: we used a truck. I had to run with my kids because those rebels told us that they can kill us anytime if we become a problem to them. So I was scared and I decided to leave. I asked one of the truck drivers to give me transport to South Africa. Coming to South Africa was not easy because one, I had to beg the truck drivers because I was not paying and for the transport and me and my kids had to hide under the seats at the boarder so that they cannot see us.

P: oh I see that is very difficult especially when you are travelling with the kids. So how did affects your mental wellbeing like being stressed about what happened back in Congo?

B: you know my brother it is painful to come from Congo where you were living a good life and being respected and come here where I have nothing, I am treated like dog, I don't even have papers. It is very painful. Sometimes I think about it I cry and my children will be telling not to cry. Imagine your parents being killed like a children whilst you are watching. It stresses me every day. I am always wishing if my parents were alive. You know I can't even tell anyone this story because that's how painful it is. I was thinking of killing myself but I thought of my children because they will not have a parent if I kill myself. I am struggling here in South Africa to pay for fees, food and to find my own place to rent. Ohhh even when I go here there were people who wanted to kill me....

P: what happened?

B: when I got here I was staying in Betrams it's very close from here. Then there was an incident that happened. You know I was at the Yeoville market going to the where I was staying in Betrams. When I was entering the taxi, the taxi marshal pushed me inside and I was carrying my baby at the back. My child was hurt because when the taxi marshal pushed me I lost control and fell. When I try to ask the taxi marshal why he is doing that, he just shouted at me saying you 'kwerekweres' should go back to your country. Then the taxi driver came and closed the door forcefully whilst my hand was holding the door and my fingers were broken.

P: oh this is bad and painful...

B: I went to report to the police and these people were arrested. They got bail but they were still going to court. When they got bail, they came back to me and they wanted to kill me and

they attacked the wrong person thinking it's me. Then I went to The Centre for the Study of Violence and Reconciliation (CSV) to seek for protection. CSV send me to Ikhaya Lethemba for protection. That how I got to Ikhaya Lethemba. You know at the shelter they were treating us so bad. The sisters would shout at us telling us that we should go back to our country, why are we here. I and my family couldn't survive. It was so bad. And they told us that we were going to stay there for 3 months and after 3 months they told us to leave. They refused to let us live longer whilst we still looking for a place to stay.

P: this was a difficult situation. So tell me, after experiencing all this from Congo and here in South Africa did you manage to forgive the rebels that killed your father and also people that led your husband to run away?

B: NO! I will never forgive them because what they did destroyed my life and my family's life. Look now my parents are dead, my husband is gone maybe they killed him too. My life is difficult because of them. I will never forgive them. Maybe one day I will but now I'm still feeling the pain because they finished me. Since I left Congo I am not happy. I am always sad and life is getting hard and hard every day. I am always asking God, why is this happening to me. Maybe I should suffer the whole of my life, I don't know. I am also a Christian but it is difficult to forgive these people. They are the reason why I am always stressed and I'm suffering.

P: so after experiencing this in Congo, when you came to South Africa did you see a social worker or a psychologists for counselling?

B: I only saw a social worker when I went CSV because the taxi drivers wanted to kill. That's when I saw a social worker.

P: so before that incident with the taxi drivers you did not see a social worker?

B: yes I didn't

P: why?

B: I don't know, I didn't think about that, I was just thinking of looking for a job and take care of my children. I also don't know where to find them. This one at CSV I only went there because other people who knew my story told me that they help me because there people who wanted to kill me.

P: oh I see. So mama tell me after you got out of Ikhaya Lethemba, how have you been surviving?

B: you know life has been difficult for me. I don't have money to pay rent, school fees and food because with the piece jobs I don't get a lot of money. I was clothes for people and also clean their houses for money. So they call me to wash. I am only free on Fridays that why I was not able to see you on Thursday. It depends, some people are generous if you wash for them, they will give 100 rand some 200 but others will give you 50 but I have no choice I just have to take it. If you wash for men they will give you more but whenever there is a women I will get less. I pray God will answer my prayers so that one day things will get better for my family. I have 3 children. The first one is a girl and she 11 years old. The second is 7 years old, it's a boy. And the last one is girl she is 3 years old. They go to Betramms School. And the little doesn't go to school. I struggle to get money for school fees because I don't have a job. I only get money when they call me to wash. Sometimes they sometime they don't call me.

P: so who pays the school fees?

B: my pastor helps me to pay the school fees sometimes. I went to negotiate with the school headmaster that I'm struggling with school fees and they understood. But I don't know when Im gonna get the money. Things are just tough. So after I left Ikhaya Lethemba I started staying with my pastor and his wife but the way we live is not pleasing here. We sleep in the sitting room but when the pastor is around we sleep in the corridor with all my kids. We sleep like rats. And also during the day we spend the whole day sitting outside at the balcony so that we give them space. I cannot afford to rent a room that's why I am living like this.

P: this is tough situation but at least your pastor is doing something. I really appreciate your participation. Thank you for agreeing to be interviewed by me. I wish you all the best in your life.

APPENDIX E

ETHICS CLEARANCE CERTIFICATE (NON-MEDICAL)



SOCIAL WORK
THE SCHOOL OF HUMAN AND COMMUNITY DEVELOPMENT (SHCD)



DEPARTMENTAL HUMAN RESEARCH ETHICS COMMITTEE (SOCIAL WORK) CLEARANCE CERTIFICATE

PROTOCOL NUMBER: SW/18/05/01

PROJECT TITLE: Exploring the role of forgiveness on mental wellbeing interventions among Congolese refugees in Yeoville

RESEARCHER/S: Mr Pride Kandemiri (1055666)

SCHOOL/DEPARTMENT: SHCD Social Work

DATE CONSIDERED: 11 May 2018

DECISION OF THE COMMITTEE: Approved

EXPIRY DATE: 30 November 2019

DATE: 08 June 2018

E Pretorius
CHAIRPERSON: Dr E Pretorius

Cc: Supervisor: Dr Thobeka Nkomo

DECLARATION OF RESEARCHER(S)

To be completed in **DUPLICATE** and **ONE COPY** returned to the Administrative Assistant, Room 8, Department of Social Work, Umthombo Building Basement.

I/We fully understand the conditions under which I am/we are authorised to carry out the abovementioned research and I/we guarantee to ensure compliance with these conditions. Should any departure to be contemplated from the research procedure as approved I/we undertake to resubmit the protocol to the committee. **For Masters and PhD an annual progress report is required.**

[Signature]

SIGNATURE

14, 06, 2018

DATE

PLEASE QUOTE THE PROTOCOL NUMBER ON ALL ENQUIRIES

APPENDIX F

PERMISSION LETTER FROM REFUGEE CHILDREN'S PROJECT



RCP

Refugee Children's Project

Reg. No 029-872-NPO

www.rcpsa.org.za

THE EXECUTIVE GOVERNANCE BOARD - EGB

Date: 28/03/2018

University of the Witwatersrand

Board of Ethics

Johannesburg

South Africa

RE: PERMISSION TO CONDUCT RESEARCH AND REFER PARTICIPANTS FOR COUNSELLING SERVICES.

This letter serves as a proof given to Pride Kandemiri Student No .1055666, an undergraduate 4th year Social Work to conduct his academic research titled "Exploring the role of forgiveness on mental health interventions among Congolese refugees in Yeoville" from June to December 2018 at Refugee Children's Project (RCP).

Given the nature of the research, should a participant experience any post traumatic experience during the interviews, our counseling services will be on standby to assist in this regard free of charge.

Should you require more information for us, please do not hesitate to contact the under signed

A handwritten signature in black ink, appearing to read 'J Namata', enclosed in a simple oval scribble.

Yours sincerely

Mrs Josephine Namata
Director

APPENDIX G
PLAGIARISM TURNITIN REPORT

1055666:TN._Pride._15_November_2018._Research_report.d...

ORIGINALITY REPORT

7 %	6 %	3 %	1 %
SIMILARITY INDEX	INTERNET SOURCES	PUBLICATIONS	STUDENT PAPERS

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2	tampub.uta.fi Internet Source	1 %
3	www.omicsonline.com Internet Source	<1 %
4	Worthington, Everett L., Jr. Griffin, Br. "Forgiveness as a catalyst for psychological, physical, and spiritual resilience in disasters and cri", Journal of Psychology and Theology, Summer 2016 Issue Publication	<1 %
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