

## **Bosnian Refugees in Switzerland**

Tendencies to self-empowerment and rehabilitation of active community-responsibility of refugees with temporary protection-status

In summer 1992, a first group of about 1000 women and children from Bosnia-Herzegovina, coming from interim Croatian camps, arrived in Switzerland. They had been invited by the Swiss Organisation for Aid to Refugees to spend a period of three months in different cantons, partly in state homes, partly in homes of Caritas and the Swiss Red Cross. The Government was reluctant to open the borders to Bosnian refugees and issued only tourist visa to these persons expelled by extreme violence from their native villages and towns.

The same three-month-status was given to another group of 1000 persons, among them a lot of old and ill ones, but also mostly women and children, who in the burning august-sun of 1992 were blocked in trains and stopped in Slovenia before the Austrian border and who during days were not accepted by any country. They were placed in Switzerland in interim homes in different cantons too. For both groups, the principle of respecting existing relationships determined the placement, so that it recurred that certain homes gathered nearly all the female and minor inhabitants of one village. Since their arrival, the responsables of the different organizations in charge of the care of these refugees fought for a better status. The issue of an only three months permit did not allow the refugees to have a feeling of protection, but contributed to an increasing instability of their situation. The government prolonged their tourist visa twice, until they got the status of temporary protection.

The war and the expulsions got more and more infernal when the winter period started. The news about concentration camps, systematic rapes and torture awaked in the Swiss population the conscience that more help was urgently necessary. But only at the end of December 1992, the Swiss government was willing to accept in Switzerland a number of 5000 refugees who should get the refugee status and not only a temporary protection, all of them persons from prisoner camps with close family members. In the meantime, the number of those with a temporary protection increased because of family reunions, and in surplus thousands of persons from Bosnia and Herzegovina were invited to Switzerland by relatives who already were living in Switzerland as workers and who had to guarantee the living of their family members by their own means, including the costs of medical treatment. In many cases, the living conditions were unbearable after a short time and the family members from Bosnia had to be integrated into the official State care system.

So since the beginning of 1993, there were refugees from Bosnia-Herzegovina in Switzerland with different status and, owing to this, with very different rights. This fact created a lot of injustice. Whereas those with the refugee status, after a transition period of three month, could be settled in own apartments, were insured against illnesses and could work like other foreigners, and whereas their children could go to school without any problems, the other ones with temporary protection had to live under much stronger restrictions and harder conditions, which even are differently defined in every

canton, according to the federative system in Switzerland. So it depends on the cantons, whether refugees with temporary protection get language courses in German, French or Italian, whether there are occupations organized for them (knitting, wood working, painting etc), whether children are integrated into the public schools, whether young people can get a professional training and whether adults can work.

Because of these restrictions and differences, I invited in the early fall of 1992 the responsables of the Swiss Red Cross and Caritas and of the cantons to form a coordination group, in order to realize the maximum of the urgent needs in the psychosocial scope. Since then this group meets regularly, discussing the needs and problems of these refugees and trying to find solutions. At the end of the year 1992, we had a rather precise knowledge of the main consequences of the traumatic events, the experience of extreme violence, of losses of dear and beloved persons, of destruction and uprootedness, of loss of hope and perspectives. The responsables of 17 refugee centres had answered to a large and detailed questionnaire concerning the psychosomatic and psychosocial problems of refugee children and adults. The respective report was published in February 1993.

Here the most important results: The urgency of schooling was obvious. The fact that children for a couple of hours had a time structure similar to that in their home town or village, that they were relieved from the depressive influence of the mothers could reconstitute part of the lost continuity, also part of the lost feeling of value. So most of the children, though they had seemed to be more traumatized and disturbed than the adults at the beginning of their stay in Switzerland, could recuperate part of their joy of life, of their faculty of concentration, of their sleep, of a less aggressive play-behaviour after rather a short time. Also the adolescents who in some cantons - especially in the canton of Zurich thanks to the initiative of the responsible of the asylum organization - could start special short apprenticeships, felt visibly better after this reconstitution of - more or less - normal life. In order to help children find an expression for their traumatic experiences, the canton of Zurich engaged two psychologists for children who organized an atelier for painting and modeling.

The mothers and the other adults, on the contrary, who had shown at their arrival feelings of relief because they were finally sheltered, were thrown after a short period into deep depressions and into a scaring abulia (Antriebschwäche). Many of them were during weeks without any news of their husbands. But when it happened that the men could join their families, new problems arose: The complete families were envied by those women whose husbands were considered as lost or who were still fighting or in prisoner camps or who were killed, then problems within the couple or the reunited family, problems of alienation and of violence.

For the coordination group, it was clear that the refugees needed other models of life organization, in order to reconstitute the sense of life, their ability of responsibility for their community and their autonomy. (\*)

Let me just present one model that has been developed in the canton of Zurich for about 800 refugees with temporary protection-status. Since March of this year, the homes in which they have lived since their arrival are managed by three refugee women. They organize the cleaning and the cooking, they collect the wishes and needs of their compatriots, they settle arguments and once every week they meet the responsible of the cantonal asylum organization in order to report and to get advice. For their work, they get a small fee. Every family-unit gets per month onto an own post-check account a certain sum for food and clothes of their own disposal. In most of the centers, since the arrival of the refugees the cooking was delegated to alternating teams,

(\*) As a model of peace. We try to make them forget the war - independent of ethnic differences, we speak of "Bosnia" and not of "Muslims, Croats and Serbs".

women and men, but in the canton of Zürich, since March of this year, every family is also enabled to cook for themselves.

This new model restitutes a lot of faculties that seemed to have been lost, it restitutes the self-empowerment especially of the women and prepares them for an eventual return to Bosnia and Herzegovina. Besides, it has the advantage to free Swiss social workers from care duties and to enable them to develop supplementary possibilities of ingenious occupations for men, women and children. So, for instance for the men, a little enterprise was organized in Zurich for the rent and reparation of bicycles. Or for the women, a catering service with Bosnian specialities and a sewing atelier where they produce well fitting cloth made to measure.

Even if certain relieves could be organized, there are still a lot of problems remaining and increasing, due to hopelessness concerning the future, due to problems concerning the relationship of the couples and of the children towards their parents. In several cantons consultation possibilities have been created, or in central meeting places where the refugees can also meet Bosnians from other centers, or in talks with psychologists that go from one center to another. The newest project in the canton of Zürich foresees the formation of volunteers für psychosocial help to refugees. They should be formed and trained by an experienced trauma-psychiatrist who had worked für the ICRC and the HCR in different countries (Dr. Gisela Perren-Klingler).

Another project which should diminish the isolation and uprootedness of the refugees involves particularly the population. Together with a radio reporter who had heard maint reports about the psychic pains of the refugees, the coordination group which I already have mentionned and a supplementary relief organisation have created a model of family-partnership. We have collected money in order to pay a half-time secretary during one year. By articles and radio emissions we could disseminate the idea at repeated occasions. Now, there are about 130 Swiss families and about as many Bosnian ones who are willing to maintain contacts, to invite each other, to celebrate birthdays and other family feasts together, to help children with school difficulties and more. The most difficult aspect of this project is language and communication related. If both parts do not have a lot of patience, there is a big danger of failure. For the moment, most of the contacts go on.

The coordination group for psychosocial help to refugees will try to extend its activities throughout Switzerland, in order to achieve for the refugees an effective improvement of life quality in the countries of exile and of mental perspectives for a return to their own countries. In every country a large network of engaged organizations and persons should act as a pressure force towards the governments, in order to enhance the poor minimal care-standards to more dignity.

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