



Queen's UNIVERSITY Family Medicine

# HORIZONS

**FORCED MIGRATION** • ISSUE 1 • 2023



Photo courtesy UNHCR The UN Refugee Agency

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# Introduction

By Dr. Eva Purkey

Forced migration refers to the forcibly induced movement of people. People may move secondary to conflict or persecution, they may be the victims of trafficking, or they may move as a result of natural or human-made disaster.<sup>1</sup> While **economic migrants**, those who move purely for the purposes of achieving economic security and improvements in their livelihood,<sup>2</sup> are not included in this definition, the line is not always clear. Someone may move for purely economic reasons (for example, a Canadian moving to the United States for a job). Someone may move to escape natural disasters (for example, drought in Somalia, which has profound economic and livelihood implications).<sup>3</sup> Or someone may move because political instability has resulted in economic collapse (consider the Venezuelan migration profiled in this edition of *Horizons*). These last two would be considered situations of forced migration.

The United Nations High Commissioner for Refugees (UNHCR) estimated at the end of 2021 that 89.3 million people were forcibly displaced.<sup>4</sup> This included 21.3 million refugees; 53.2 million internally displaced persons; and nearly 15 million combined Palestinian refugees, Venezuelans displaced abroad (not registered as

refugees), and asylum seekers. These numbers pre-date the Russian invasion of Ukraine, which has resulted in an additional 7.2 million Ukrainian refugees displaced within other European countries and 6.9 million internally displaced as of September 2022,<sup>5</sup> **for more than 100 million forcibly displaced persons worldwide**. This is almost three times the entire population of Canada on the move.

These are the highest numbers on record.

A **refugee**, according to the 1951 *Refugee Convention*, is “a person who, owing to a well-founded fear of persecution on the basis of race, religion, nationality, political opinion, or membership in a particular social group, is outside of their own country and is unable, or owing to such a fear, is unwilling, to return.”<sup>6</sup> To be a refugee, you must have crossed an international border. However, not all countries are signatories to the *Refugee Convention*, and therefore, not all countries afford protection to people who meet this definition. At this time, people fleeing climate disasters are not included in the official definition of a refugee. The majority of people who meet this definition are fleeing conflict, and some have been in flight, or living in situations

**69%**  
ORIGINATED FROM  
JUST FIVE COUNTRIES

More than two-thirds (69 per cent) of all refugees and Venezuelans displaced abroad came from just five countries.

**Syrian Arab Republic**  
6.8 million

**Venezuela**  
4.6 million

**Afghanistan**  
2.7 million

**South Sudan**  
2.4 million

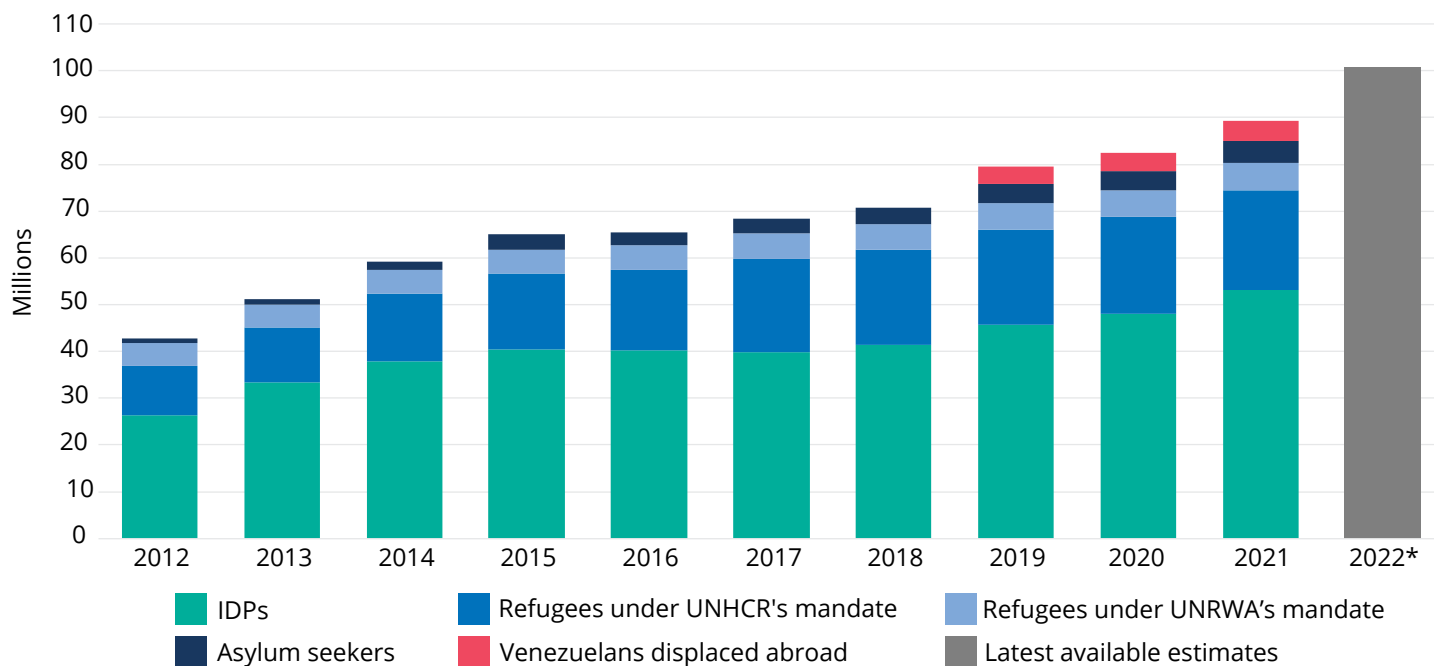
**Myanmar**  
1.2 million

Source: Cronholm, P.F., et al. (2015)  
Credit: UNHCR The UN Refugee Agency

of precarity such as refugee camps, for decades. Some were born in camps and have grown to adulthood, living out their entire lives in what were supposed to be temporary solutions. Prior



## People forced to flee | 2012–2022



\* 2022 figures are estimated using data available as of 16 May 2022.

to the Russian invasion of Ukraine, 69 per cent of the world's refugees came from five countries: Syria, Venezuela, Afghanistan, South Sudan, and Myanmar (Burma).

An **internally displaced person**, on the other hand, may be fleeing exactly the same kinds of circumstances as a refugee; however, they have not crossed an international border and are displaced within their own country.<sup>6</sup> They may be living in camps for internally displaced persons, or moving from community to community or site to site to evade law enforcement or conflict, or to flee the results of natural disasters. They are more difficult to count, and because they are still technically under the jurisdiction of their own country, they are not protected by international law. Countries with large numbers of internally displaced people include Colombia, Syria, the Democratic Republic of Congo, Ethiopia, Yemen, and Ukraine.<sup>6, 7</sup>

In addition to refugees and internally displaced persons, other forms of forced migration are often forgotten. **People who have experienced trafficking** are those who have been made — through force, fraud, or coercion — to provide a service, often labour or a sexual act. This can involve forcible movement within a country or across an international border. Some have also referred to human trafficking as modern slavery. This is perhaps the most difficult form of forced migration to count, but it occurs all over the world, including in Canada.<sup>8</sup>

**Undocumented migrants** are people who are in a country not their own but who have no status in that country (i.e. are not formally considered refugees, do not have a visa, and are not technically allowed to be there). These people often do not have access to health care or education, and constantly face the threat of being detained and forcibly sent back to their country of origin.



Finally, **stateless people** are those who have been denied a nationality, and therefore have no access to basic rights conferred by a nationality such as education, health care, employment, or freedom of movement. They differ from undocumented migrants in that no country recognizes them as citizens, and they have no country to return to even if it were safe. Palestinians, as well as the Rohingya, a group from Myanmar, are among the largest groups of stateless people in the world.<sup>9,10</sup>

The articles in this edition of *Horizons* cannot do justice to the massive forced migrations happening worldwide. All migrations are important, and each migrant is a person, with a story, and with loved ones they have lost or left behind. Some migrations make the news in Western media for extended periods of time and draw attention to the plight of migrants — including, most recently, the Ukrainian crisis, and, prior to that, the Taliban's 2021 overthrow of the Afghan government and the migration that ensued (and is ongoing). Many migrations, however, are not reported in the Western media, and even those that are generally make the news cycle for quite a short period of time when compared with the human impact and suffering they cause. Internal displacements are even less likely to be reported, as they ultimately have less impact on Western nations.

As the impacts of climate change are felt ever more frequently in ever more locations around the world, forced migration is expected to increase.<sup>11</sup> The UNHCR reported that from 2008 to 2016, 21.5 million people were displaced annually by climate-related disasters, and we know this has already worsened since that time. Like conflict, climate change is not evenly felt around the world, and those already struggling with poverty and disparities are most likely to strongly feel its effects.

In 2018 the world came together to endorse the Global Compact for Safe, Orderly and Regular Migration. Nevertheless, how countries respond effectively to these massive movements of people is likely to test the limits of our democratically elected

governments, international co-operation, and, ultimately, our common humanity.

While not representative, this edition of *Horizons* seeks to bring a moment of attention to but a few of the mass forced migrations happening worldwide, the Canadian response at a national and local level, and the human impact of forced migration everywhere.

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## REFERENCES

1. Stankovic, S., J. Ecke, and E. Wirtz, *Forced Migration*. 2021, Oxford University Press
2. *Economic migrant*. [cited 2023 Jan 9]
3. *Country Profile Somalia*. 2022 [cited 2023 Jan 9]
4. UNHCR. *Figures at a Glance*. 2022 [cited 2023 Jan 9]
5. UNHCR. *Ukraine Emergency*. [cited 2023 Jan 9]
6. UNHCR. *What is a Refugee?* [cited 2023 Jan 9]
7. *Global Report on Internal Displacement 2022*. 2022 [cited 2023 Jan 9]
8. UNDOC, *Global Report on Trafficking in Persons: Human Trafficking. A Crime that Shames Us All*. 2009.
9. *The Rohingya: The world's largest stateless population*. [cited 2023 Jan 9]
10. *Briefing: Palestinians and the search for protection as refugees and stateless persons in Europe*. 2022 [cited 2023 Jan 9]
11. House, W. *Report on the Impact of Climate Change on Migration*. 2021 [cited 2023 Jan 9]



# Afghanistan

## A story of displacement



Hazara families at Afghanistan's first national park, Band-e-Amir, in Bamiyan Province. The Hazara people continue to be persecuted and displaced by the Taliban. (Figure 4)

*Article and Photos by Dr. Geoff Hodgetts*

We had stopped about half-way up the Shewa valley to purchase some fresh yogurt from the nomads who were grazing their flocks, as they have been doing for centuries. [Fig.1] After our early departure at 5 a.m. from Faizabad, the capital city of the remote northeastern province of Badakhshan, we had reached the mid-point of that day's journey to the town of Shegnan, close to the Tajikistan border, and site of the health centre I was to assess.

By the time we arrived, after an 11-hour drive, we had passed through five different tribal and linguistic areas, each with its own cultural traditions. In its mountainous remoteness, Badakhshan carries with it a history that exemplifies Afghanistan, with its mix of tribal and ethnic groups, its village structure, and its waves of forced displacement of people due to conflict,

environmental challenges, religious persecution, economic hardship, insecurity of food supply, education, and health care. [Fig.2]

Badakhshan also bears the mark of having the highest maternal mortality rate ever measured. The focus of the weeks I spent there was to assess opportunities for Canadian funding to reduce that burden.

In the north, I felt somewhat protected by the remoteness and by its reputation for having held out against the Taliban during their rule in the 1990s. The next day, while visiting a health post in Gharjwin, a tiny village deep in the mountains, a report reached us of a surprise Taliban raid on a nearby provincial police station with many fatalities. This *expectation of the unexpected* was what defined everyday life for my hosts and seems to determine how one must approach such a complex place.





Nomadic herders in Badakhshan, just one of many tribal groups in Afghanistan, and vulnerable to forced displacement. (Figure 1)

This year will mark the 50th anniversary of the coup d'état that dethroned King Zahir Shah and established the First Republic of Afghanistan. This event can be used as a starting point for the endless conflict that has followed, with discrete waves of forced migration of peoples, internally from one province to another and externally as refugees.

A second and bloodier coup followed in April 1978, bringing in a communist government that attempted to implement land and economic reforms that were deeply unpopular with the traditional, rural tribal groups. This set the stage for a civil war that was waged for the next 20 years.

This coup also led to the first massive wave of more than 400,000 Afghans fleeing into neighbouring

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Pakistan. It also brought about the invasion by Soviet Union forces on Christmas Eve 1979, in a move to prop up the foundering government. This triggered a violent, country-wide guerilla war waged by many tribally affiliated groups of *mujahideen* led by warlords, armed and trained by external actors such as the United States. Within a year, more than four million people had fled across the borders to Pakistan and Iran. After the Soviets pulled out in February 1989, these tribal factions turned on each other in a power struggle, the dominant group seizing Kabul in 1992.

With the end of the communist period, under United Nations leadership, about 900,000 Afghans returned home in the largest repatriation program to date. The





issues returning displaced peoples faced will be raised again later.

The Taliban (students) arose as a movement out of religious schools, or madrassas, established in the refugee camps in Pakistan and funded by Saudi Arabia and local Pashtun tribal leaders. Becoming a militarized force, by 1994 they quickly took control of Kandahar Province just over the Pakistan border, at first bringing stability and peace, and winning popular support. They rapidly grew in numbers and soon controlled southern and western Afghanistan. However, most Afghans deeply resented their strict reading of an ancient Pashtun tribal social code.

As they tried to move north, they clashed with an alliance of warlords, joined in their opposition to the Taliban, who found it almost impossible to make inroads into places like Badakhshan. By late 1996,

however, the Taliban had taken Kabul and many other major cities and were de facto leaders of the country. This brought about another massive exodus of government workers, educated women, medical professionals, and teachers, and internal displacement of hundreds of thousands of ethnic minorities such as the Hazara, who feared discrimination.

By mid-2000, under severe UN-imposed sanctions, the Taliban government continued to expand its reach into the north. This renewed violence was compounded by the worst drought in 30 years, driving another wave of hundreds of thousands into Pakistan. This double threat of war and a natural disaster are still the main drivers today for most Afghans' decision to flee.

Following the events of September 11, 2001, and the US-led military intervention that drove the Taliban from power, there was an initial period of optimism



The main “highway” through Badakhshan. Like much of the country, the mountainous terrain provides security but restricts access to services and brings frequent environmental threats. (Figure 2)



Cliff face that once housed hundreds of Buddhist monks and the site of the Giant Buddhas of Bamiyan, destroyed by the Taliban in 2001. The empty niche of one of the Buddhas can be seen in the centre. (Figure 3)

with voluntary returns to Afghanistan, including those that would take leadership positions with the new government ministries. The UN-sanctioned International Security Assistance Force (ISAF) established a military presence in every province, Canada notably being given responsibility for Kandahar, the traditional home of the Taliban.

While temporarily defeated, the Taliban had regrouped in northern Pakistan and soon began a violent insurgency that nullified the initial enthusiasm for safe return by exiles and made the attempts at state-building by western powers very difficult. In the first decade of international intervention, despite the deeply rooted systemic corruption at all levels of government, and the staggering sums of development funding wasted on questionable projects, there were some significant improvements. This was especially felt in the education sector, and especially by girls and young women,

and within the health sector, albeit almost entirely dependent on the continuation of international funding.

I first met Dr. Habiba Sarabi, hematologist, women's rights activist, and the first female provincial governor, at her office in Bamiyan city. Tucked away in the central highlands west of Kabul, Bamiyan Province is the ancient home territory of the Hazara peoples, who are Shia Muslims and much persecuted historically by the Sunni Muslim Taliban, most of whom come from the dominant Pashtun tribes. Bamiyan was a crossroads for travellers on the Silk Road and in the first centuries CE, once home to thousands of Buddhist monks living in the natural caves carved into the sandstone cliffs. [Fig.3] Governor Sarabi, a Hazara by birth, exemplified the optimism following the fall of the Taliban, with grand ideas for her city and province. I was there to assess a request for Canada to build a new hospital for the Hazara peoples and was able to explore Bamiyan and learn more about





the province's history, including the violent persecution suffered under the Taliban, leading to flight to safer parts of the country. [Fig 4]

Only a few years later, by 2014 the political appetite for maintaining a large military presence in Afghanistan had dwindled and the ISAF mission ended. By then it was apparent that, in time, the Taliban would succeed in controlling more of the country through continued violence. Inspiring leaders like Dr. Sarabi were forced to flee under the increasing violence and by 2018, the UN documented the highest number of civilian deaths.

What received less attention is the fact that during these years, countries hosting Afghan refugees had made their borders more inhospitable. Forced returns, especially from Pakistan, Iran, and Turkey, began in earnest in 2016, driving Afghans back into dangerous settings, often with no home to return to and with few economic prospects. This often set up a revolving door of forced return, failed integration, and repeat migration. Facing accusations of refoulement, the forced return of refugees to a setting where they are likely to suffer persecution, some governments did institute reintegration support programs, but these were typically focused on economic relief, were poorly co-ordinated, and did not account for local factors. For example, in the last six years, Iran has returned almost five million refugees, many of them Shiite Muslims and now liable to persecution by the Taliban.

We can all recall the images from late August 2021 of triumphant Taliban re-entering Kabul and the scenes of chaos and panic as families desperately tried to find ways to exit the country. While the Taliban's return to power did bring to an end most of the conflict-driven migration, it soon became apparent that they had not changed their policies or methods of ruling. Fearing ethnic and religious persecution, hundreds

of thousands have fled into Iran primarily from non-Pashtun provinces. To add a further dimension to the crisis, a severe earthquake struck the southeastern part of the country in June 2022, while chronic drought continued to destroy crops. Heavy summer rains and flash flooding in many regions destroyed houses, roads, and farmlands. These environmental events displaced an estimated 1.5 million Afghans, adding to the 3.5 million already displaced by conflict.

The freezing of all international financial aid has only deepened the crisis for virtually the whole nation, as governments and UN agencies seek ways to

circumvent the Taliban and provide humanitarian aid directly to those in need. One must also remember that this has all played out during the pandemic.

While information is scattered and incomplete, what we do know from sources such as Human Rights Watch is bleak. We do know that forced return of refugees must end; asylum must be provided to ethnic and religious minorities like the Hazara people, hundreds of whom were killed in 2022; women and girls have experienced well-publicized attacks on their rights; malnutrition is widespread, as crop failures and land confiscation by the Taliban are the norm; and

more than 90 per cent of the population faces food insecurity, lack of medicines, and poverty. These existential threats will only lead to more waves of massive displacement. The international community must find flexible, adaptive responses to this humanitarian crisis.

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# Economic collapse, forced migration, and human rights abuses:

The ongoing triple burden Venezuelan migrants/refugees face in Latin America

*By Dr. Susan Bartels and Luissa Vahedi*

Venezuela has been experiencing a severe socioeconomic and political crisis since 2017, causing one of the largest migration emergencies in the history of Latin America and the Caribbean (LAC). An estimated 7.7 million people need humanitarian assistance in Venezuela and another 7.1 million are in need of humanitarian assistance in other countries.

This makes Venezuela the world's third-largest external displacement crisis after Ukraine and Syria.

In addition to human rights abuses in Venezuela, many families are forced to leave because of poverty and lack of employment, food insecurity, and poorly functioning health care and education systems. Mothers, who are traditionally the primary care givers within families, frequently report that they have no



choice but to leave Venezuela to provide a future for their children. However, because the Venezuelan administration is dysfunctional and many offices are non-operational, it is exceedingly difficult to obtain passports and travel documents. Without these formal documents, Venezuelan refugees/migrants have been forced to enter some host countries, like Ecuador and Peru, using informal routes. Using these informal routes, which are unregulated and unmonitored, puts refugees/migrants at higher risk for violence, robbery, and sexual assault, as well as sex and labour trafficking. Because they have entered the country illegally, many refugees/migrants fear they will be deported if they report abuse and exploitation to the local authorities. As such, Venezuelan refugees/migrants remain highly vulnerable to human rights abuses by opportunistic perpetrators who take advantage of their dire economic circumstances and precarious legal status in the host country.

The large number of displaced Venezuelans has overwhelmed the institutional response capacity of many host countries and, even prior to COVID-19, the Venezuelan crisis had negatively influenced population health with increased rates of maternal mortality and outbreaks of preventable diseases such as measles, malaria, and tuberculosis.

In almost all host countries, Venezuelan refugees/migrants report xenophobia (fear or dislike of “foreigners”). This discrimination based on nationality

is experienced in daily life on the streets and in markets with verbal violence including threats and insults, as well as in the housing sector with Venezuelans facing difficulties renting and being subjected to evictions.

The health sector has also been implicated. For instance, in Ecuador the law allows for free and accessible health care regardless of nationality or legal status. However, Venezuelan refugees/migrants report being refused care, receiving substandard care, or being treated with hostility when trying to access medical services.

Similarly, when trying to seek employment, some Venezuelans report being turned away by potential employers, facing labour exploitation with lower pay and/or unsafe working conditions, and facing discrimination regularly in the workplace. Within many host countries, high employment rates and limited public infrastructure, such as health care and housing, contribute to

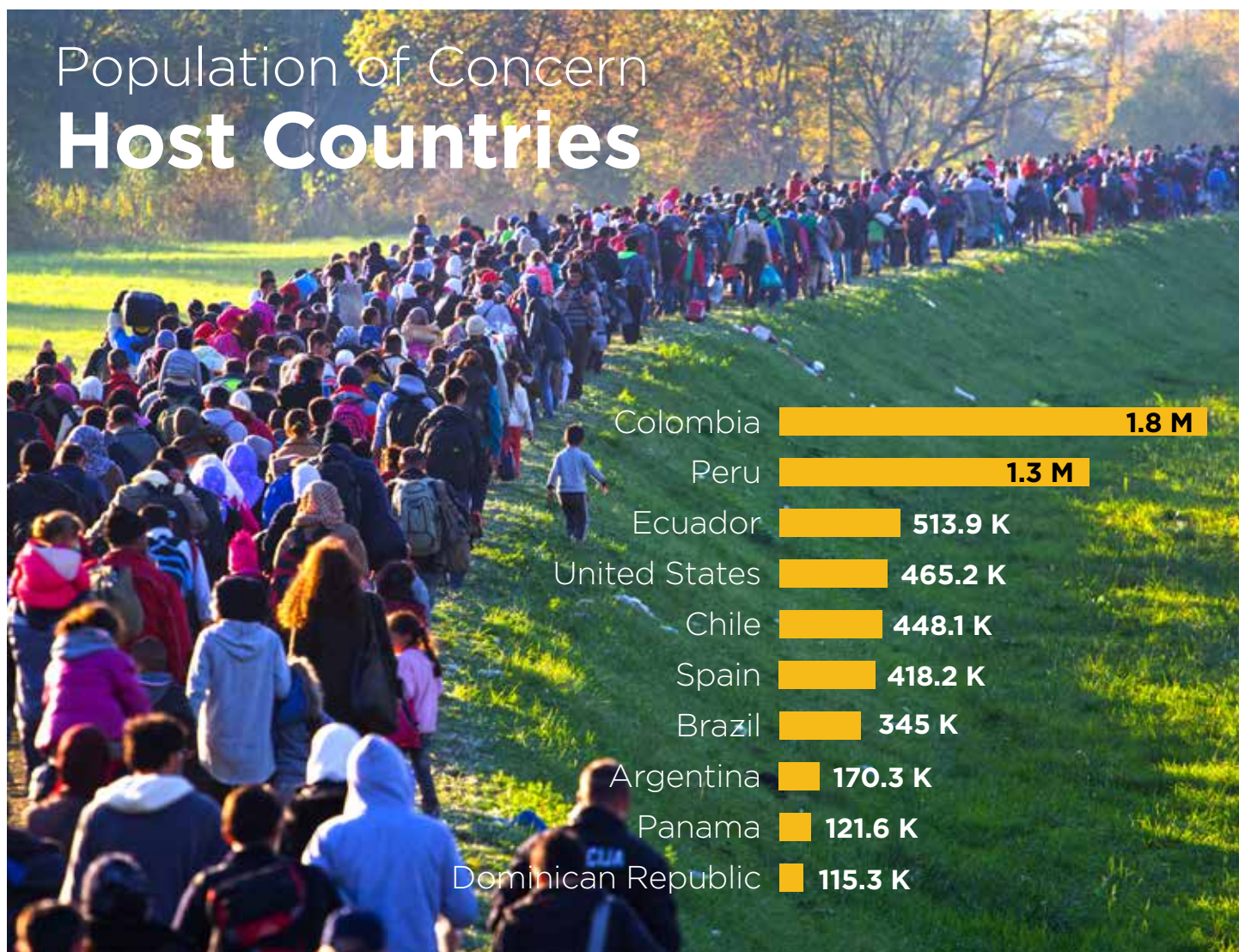
competition for restricted resources, in turn, fuelling xenophobic attitudes and behaviours. Finally, in some contexts government rhetoric and media sensationalism of crimes involving Venezuelans also exacerbate the discrimination experienced.

The COVID-19 pandemic has been detrimental to Venezuelan refugee/migrants’ health, but it has also magnified social, economic, and security concerns. For instance, because of the pandemic, the poverty rate in LAC is estimated to have increased to approximately 34 per cent, and the rate of extreme poverty increased to approximately 12.5 per cent. In 2020, 40 per cent





# Population of Concern Host Countries



\*Top hosting countries of Venezuelans who are forcibly displaced (Data Source: Regional Inter-agency Coordination Platform May 2022)

of the region's population experienced moderate or severe food insecurity, up from 24.5 per cent in 2015. During COVID-19, an estimated 54 per cent of workers in LAC were engaged in informal employment with low incomes and lacked access to social safety nets (e.g., unemployment insurance). Pandemic-related job loss disproportionately affected women and girls, particularly refugees/migrants. Female participation in the labour force fell approximately five per cent and is anticipated to remain at levels observed two decades ago. Unfortunately, worsening poverty, unemployment, and precarious employment are often met with fiscal austerity and disinvestment in social

protection policies within host countries.

During forced migration, Venezuelan women/girls also face additional gendered vulnerabilities such as intimate partner violence, sexual assault, and early marriage/unions, as well as sexual exploitation, survival sex, transactional sex, and human trafficking. Reports of gender-based violence (GBV) in LAC monumentally increased during COVID-19, with a 50 per cent increase in the number of GBV complaints among refugees/migrants in Colombia and a 65 per cent increase in femicides in Venezuela. As rates of GBV increased during the pandemic, support services were reduced due to the overstretched health sector



and social distancing policies. Furthermore, attention has been drawn to the lack of access to comprehensive sexual and reproductive health care for refugee/migrant Venezuelan women and girls, in particular highlighting inequities in access between refugees/migrants and the host communities.

With significant poverty and limited access to formal employment, some women have no choice but to engage in survival sex to meet the basic needs of their families such as food and shelter. Sex is also often exchanged for transportation including with private drivers, taxi drivers, truck drivers, and smugglers. In the context of the hyper-sexualization of Venezuelan women, survival sex leads to refugees/migrants being stigmatized as sex workers, which contributes to poor mental health. Additionally, the survival sex leads to sexually transmitted infections and pregnancy, and puts women at risk of violence that may result in death or near-death experiences.

Refugee/migrant children also face particular risks. For instance, some children travel alone, unaccompanied by a parent or guardian, while many children are unable to access formal education in their host communities. With high rates of poverty, this contributes to exploitative child labour. Sexual abuse of minors has also been frequently reported, including in schools, and children are known to be at risk of recruitment into armed groups, trafficking, and illegal adoptions in which they are kidnapped and sold to parents waiting to adopt.

2SLGBTQIA+ refugees/migrants typically experience heightened discrimination because they are Venezuelan and because of their sexual orientation

and gender identity. This includes harassment in the workplace, difficulty finding employment, being denied services including shelter, and physical violence. Many 2SLGBTQIA+ refugees/migrants are homeless and are vulnerable to sexual violence and survival sex. They are often hesitant to report violence because the

police and authorities would do little to help and might further discriminate against them.

While most Venezuelan refugees/migrants face challenges during their forced displacement, the risks women, children, members of the 2SLGBTQIA+ community, and persons with disabilities face are often heightened due to inequities, discrimination, and underlying vulnerabilities. Humanitarian responders, funders, and researchers need to take these heightened vulnerabilities into account to improve outcomes and mitigate risks for members of equity-deserving groups.

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Photo courtesy UNHRC The UN Refugee Agency

# Mixed Migration:

## Refugees and asylum seekers in Southern Africa

*By Dorcas Okyere*

In the last decade, the Southern Africa region has become home to displaced persons from Burundi, the Democratic Republic of Congo (DRC), Ethiopia, and Somalia. Thus, most forcibly displaced persons from East Africa find a home in Southern Africa. The region presently hosts 8.9 million forcibly displaced persons, of whom 1.1 million are refugees and asylum seekers (Khan & Rayner, 2020).

Historically, forced migration in the region during the precolonial era was a consequence of drought, territorial seizure, disease, dwindling resources, and inter-ethnic conflict. Many forced movements in the region were also instigated by colonizers and characterized by unrestricted geographies because of the lack of boundaries before colonialism (Crush & Chikanda, 2014). Southern Africa experienced continuous waves of forced migration in the previous five decades because of armed conflicts and civil wars. For instance, fights for freedom and self-government resulted in thousands of Mozambicans, Angolans, Namibians, and South Africans fleeing to neighbouring countries like Zambia and Zaire (now DRC) for refuge. After independence, forced migration in the region is





mainly attributable to internal conflict and civil unrest in countries such as the DRC, Angola, Mozambique, and Zimbabwe. At its highest, the region produced close to two million forced migrants, but this has dwindled. Particularly, post-apartheid South Africa brought a significant change to the region's forced migration pattern. Countries like South Africa, Namibia, and Angola ceased to be the main refugee-generating countries as many political exiles began returning to South Africa and many forced migrants returned to Angola and Mozambique. Southern Africa has become a destination for asylum seekers and refugees from different parts of Africa. The DRC experienced an influx of refugees because of the Rwandan genocide in the 1990s; however, this number reduced in the 2000s. Rwandan refugees also moved to other countries in Southern Africa.

In the last two decades, there has been a steady surge in the number of asylum seekers in Southern Africa from East, West, and North Africa. Mixed migration streams combine genuine refugees with economic migrants who seek to legitimize their irregular status by applying for asylum. States in the region must deal with mixed migration flow because, besides receiving refugees, most states protect stateless persons, economic migrants, and persons displaced because of climate change (UNHCR Global Trends, 2019). Specifically, the issue of mixed migration has resulted in states grappling with the notion of "what constitutes a refugee." Most states in the region feel they are unfairly burdened with economic migrants and other displaced persons who come to the region because of unfair cultural practices in addition to persons displaced because of war and civil unrest (Sebola, 2014).

Consequently, the Tanzanian government, together with the United Nations High Commissioner for

Refugees (UNHCR) and the International Organization for Migration (IOM), convened a regional conference where an action plan was developed to support states to differentiate genuine refugees from irregular migrants. With this said, South Africans are unwilling to recognize that there is any forced migration at all when it comes to Zimbabweans, but the number of Zimbabweans seeking asylum in South Africa continues to surge. This dramatic increase signifies forced migration facilitated by economic despair, political persecution, and continuous human rights violation. All these factors threaten the well-being of individuals who seek refugee status and, thus, should be offered protection.

**Mixed migration streams combine genuine refugees with economic migrants who seek to legitimize their irregular status by applying for asylum.**

All South African countries are signatories to the UN *Refugee Convention* except for Madagascar, Namibia, and Mauritius. Nonetheless, there are differences in the approach to refugee protection in the individual countries, partly because of how refugees have evolved and the various refugee acts' reformations in these countries. Countries such as Malawi, Tanzania, Zambia, Namibia, Swaziland, and Zimbabwe require refugees to reside in specific settlements while Angola, South Africa, and Mozambique allow them to engage in gainful

employment activities. Particularly, laws in South Africa do not allow for the encampment of refugees and encourage their integration and assimilation into South African societies. This is helpful to refugees in the country because they get a sense of identity and belonging. Asylum seekers and refugees in South Africa enjoy the liberal provision of their rights on paper because the country's refugee law is human rights-centred (Khan and Schreier, 2014). However, most refugees and asylum seekers are denied some rights and privileges because of their status as foreigners. Some are denied employment and access to some social services because they are not citizens or

permanent residents.

Some challenges of forced migration in the region are that asylum-seeking and refugee status are mainly given to migrants from war-torn countries, effectively excluding migrants seeking asylum because of economic or cultural reasons.

Additionally, refugees in the region must wait for long periods to process their asylum claims due to cumbersome administrative procedures. Migration has increasingly been linked to security concerns beyond the usual allegations that migrants take away jobs and undercut wages (Castles, Haans & Miller, 2014), thus, refugees in the region are also categorized as a security concern instead of a humanitarian one, which challenges their access to the asylum system. These challenges have compounded the vulnerable state of most refugees in the region and left many undocumented and unprotected.

In recommendation, refugee and asylum-seeking status should be granted to persons seeking protection and not only to individuals who are displaced because of wars and civil unrest. Economic desperation and negative cultural practices can threaten lives in the same way as wars and should be given the same consideration. This will require international bodies to step up and provide more support to countries hosting refugees in the region. This support should also be targeted at providing administrative assistance to reduce or eliminate bureaucratic procedures in the asylum adjudication process and making countries in

the Southern African region understand that refugees are only seeking safety and do not constitute a security concern.

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*Dorcas Okyere is a PhD candidate in gender studies at Queen's University whose research is focused on migration and the experiences of migrants. Her current research is on the economic and social experiences of African women migrants in Cape Town, South Africa.*

## REFERENCES

Castles, C., Haans, D.H. & Miller, M.J., 2014. *The Age of Migration*. The United Kingdom. Grave Macmillan.

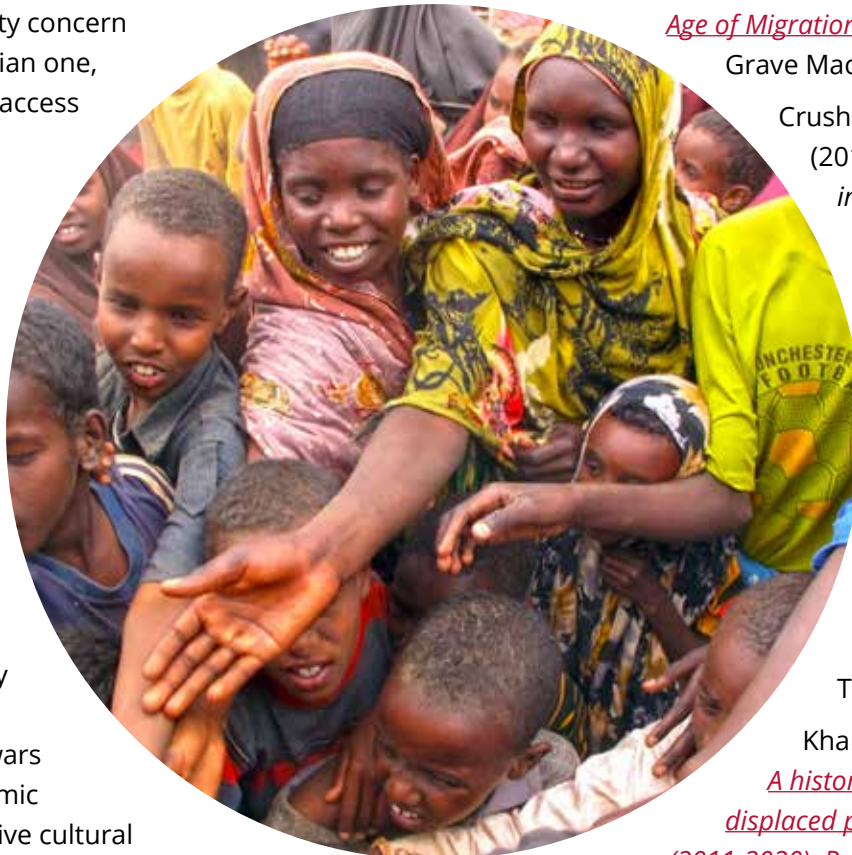
Crush, J. & Chikanda, A. (2014). "Forced Migration in Southern Africa," *The Oxford Handbook of Refugee and Forced Migration Studies*. Edited by Elena Fiddian-Qasmiyeh, Gil Loescher, Katy Long, and Nando Sigona

Khan, F. & Schreier, T. (2014). *Refugee Law in South Africa*. Cape Town. Juta Publishers

Khan, F. & Rayner, N. (2020). *A historical overview of forcibly displaced persons in Southern Africa (2011-2020): Realising the Expectations of the Global Compact on Refugees*

Sebola, M.P., 2019, "*Refugees and immigrants in Africa: Where is an African Ubuntu?*" Africa's Public Service Delivery and Performance Review 7(1), a285

*UNHCR, Global Trends: Forced Displacement in 2019*







# The Canadian Legal and Policy Framework

*By Colin Grey*

Canada deserves its reputation as a welcoming country toward refugees. In 2021, the most recent year for which government statistics are available, 60,228 refugees were admitted as permanent residents, in addition to 11,377 others admitted on other discretionary humanitarian grounds. Among those admitted were

20,428 refugees resettled from abroad, making Canada the world leader in refugee resettlement for the third year in a row (Immigration, Refugees and Citizenship Canada [IRCC] 2022). Figures from the United Nations High Commissioner for Refugees (UNHCR) indicate that Canada accepted 1,088,015 refugees between 1980 and 2017 (UNHCRa 2023).





These are not just numbers. Canadians have given more than one million people the chance to rebuild their lives.

Still, our generosity must be put in context. The number of refugees admitted to Canada pales in comparison to the 103 million forcibly displaced people worldwide, as reported by the UNHCR (UNHCRb 2023). Canadian governments have been slow or ineffectual in responding to some refugee situations, such as the flood of refugees fleeing the Syrian civil war beginning in 2011 and those seeking to escape Afghanistan after the withdrawal of American troops in 2022.

Successive governments (both Conservative and Liberal) have put in place legislative measures aimed at limiting access to refugee protection in Canada. Most recently, during the COVID-19 pandemic, bans on border crossings and travel have severely limited access to refugee protection in Canada.

There is a paradox here. Refugees are popularly perceived as having strong claims in justice, that is, rights to protection. Yet even generous countries like Canada find ways to limit the exercise of those rights. Those limits should lead us to ask what the rights afforded refugees really mean.

### THE INTERNATIONAL LAW CONTEXT

Unlike other aspects of immigration policy, refugee protection is shaped by international law. Most important are the obligations set out in the 1951 *Convention Relating to the Status of Refugees*, which Canada helped draft but did not sign until 1969. The 1951 *Convention* requires countries not to return refugees to places where they would be in danger.

This right of non-return, usually referred to as *non-refoulement*, constitutes the strongest and most important right granted refugees.

As required by the 1951 *Convention*, Canadian legislation protects people who have fled their country of origin because of “a well-founded fear of persecution for reasons of race, religion, nationality, membership in a particular social group or political opinion.” Canadian law also offers protection in accordance with its general human rights obligations

to people escaping from torture, wrongful death, or cruel or unusual treatment or punishment. This human rights protection is in some ways broader than protection under the 1951 *Convention*, since the feared mistreatment does not have to be discriminatory. Protection in either case may be denied if a person seeking protection is found to have committed serious domestic or international crimes.

Notably, protection is not available, either under Canadian or international law, for people facing displacement due to natural or man-made disasters, slow onset climate change, or severe poverty. In principle, even people in such situations might be granted protection in Canada on humanitarian or compassionate grounds or under a discretionary public policy. Whether such relief might ever be forthcoming would be up to future governments and electorates.

### INLAND REFUGEE PROTECTION

Most refugees who become permanent residents apply for protection after having come to Canada, either under another form of admission or through irregular



Photo courtesy UNHCR The UN Refugee Agency



entry. Eligible claimants proceed to the Refugee Protection Division (RPD), an administrative tribunal, for an oral hearing. Of 42,480 claims the RPD finalized in 2021, 30,290 (71 per cent) were accepted. Negative decisions may be appealed to the Refugee Appeal Division (RAD), where 3,862 (35 per cent) out of 11,022 appeals succeeded on the merits in 2021 (Immigration and Refugee Board of Canada [IRB] 2023).

Those odds may seem pretty good. Still, the RPD and RAD come in for frequent criticism. One enduring complaint concerns delays. According to information on the tribunal's website, it currently takes about 24 months for an RPD decision and 12 months for an appeal to the RAD. Another, supported by research from Professor Sean Rehaag of Osgoode Hall Law School (Rehaag 2023), is that success or failure depends far too much on the decision-maker's identity: that receiving protection is "the luck of the draw."

A third criticism has been that Canada's immigration legislation restricts access to asylum through procedural mechanisms, such as limits on eligibility or appeal rights. These restrictions are often added to the law after highly publicized and controversial events, such as the arrival of hundreds of Tamil claimants from Sri Lanka on board two cargo ships in 2009 and 2010. Other mechanisms, like visa requirements, may prevent claimants from getting to Canada at all. Such limits on access to refugee protection have largely evaded judicial scrutiny because courts have decided the constitutional right to life, liberty, or security of the person is only engaged immediately prior to deportation.



One of the most contentious mechanisms for limiting access to asylum has been the Safe Third Country Agreement. Under the agreement, non-American claimants coming from the United States may be returned to that country unless they entered Canada illegally, among other exceptions. After Donald Trump's election in late 2016, thousands of people afraid of deportation began crossing the border into Canada from the U.S. to claim asylum. More than 20,000 came in 2017 alone. After a dip during the

pandemic, the number of border crossers surged again to 34,794 in the first 11 months of 2022. The irregular

border crossings have prompted renewed debate over the agreement, including a legal challenge that is now before the Supreme Court of Canada. Among the questions to be decided is whether the agreement is unconstitutional.

### RESETTLEMENT FROM ABROAD

The system for inland refugees attracts controversy whenever claims in Canada shoot up. Refugee resettlement, on the other hand, tends to capture public attention when civil wars or other catastrophes lead to media images of large numbers of refugees huddled in boats, sheltering in camps, or making their way on foot to what they hope will be places of safety. The harrowing image of Alan Kurdi, a two-year-old boy from Syria, lying dead on a beach in Turkey in September 2015 arguably swung Canadian policy toward admitting large numbers of Syrian refugees: 44,620 since November 2015 (IRCC 2021). Canada has also accepted more than 20,000 Iraqi refugees since 2014 and more than 6,000 Bhutanese refugees between 2008 and

2014, among other groups resettled in large numbers in the past (Desloges and Sawicki 2021, 502-03).

Unlike with inland claimants, where the right to *non-refoulement* applies once a claimant is on Canadian territory, resettling refugees from abroad is not an international obligation. Target resettlement numbers are therefore set each year by the government, as are the regulatory criteria for selecting them. An applicant must either meet the refugee definition from the 1951 *Convention* or they must be outside their home country because they are “seriously and personally affected by civil war, armed conflict or massive violation of human rights.” Applicants must have no “reasonable prospect” of a “durable solution,” such as safely returning to their home country or resettling in another country. They are also assessed for their ability to become established in Canada, taking into account factors like “resourcefulness” and employability. Finally, they must not be inadmissible for security, criminality, or financial reasons. Notably, some of these criteria look more like immigration policy than refugee law.

There are broadly two resettlement streams: government-assisted refugees and private sponsorships. Government-assisted refugees receive immediate help, such as being met at the airport or receiving help finding accommodation, from government-funded community organizations. They also generally get financial assistance from the government for one year. In contrast, privately sponsored refugees receive support from organizations or groups of community members. Canada famously pioneered the private-sponsorship model, which accounts for 368,000 resettled refugees — or nearly half of all resettled refugees — since 1978. Indeed, since 2013 more refugees have arrived via private sponsorship than through government support (Van Haren 2021). There is also a hybrid, Joint assistance program for special-needs cases (such as women at risk) where the government provides financial help and private sponsors provide ongoing personal assistance for up to two years, or three in exceptional cases.

## CONCLUSION

Canada’s immigration laws, including its laws with respect to refugees, are always changing. Keeping up requires not just monitoring legislation and regulations, but also monitoring the government website where new policies are regularly posted. Where the government has most control, on resettlement, it has announced an intention to expand opportunities, especially for human rights defenders and vulnerable people from Afghanistan. Where it has less control, with respect to inland claimants, its measures tend to receive less attention and to be more restrictive. Nonetheless, the case before the Supreme Court on the Safe Third Country Agreement may have broader repercussions for the constitutional rights of refugee claimants and the measures that can be taken to limit access to asylum.

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## REFERENCES

- Desloges, C. & Sawicki, C. *Canadian Immigration and Refugee Law: A Practitioner’s Handbook*, 3d ed. (Toronto: Emond Montgomery, 2021)
- Immigration, Refugees and Citizenship Canada. [2022 Annual Report to Parliament](#) (11 November 2022)
- Immigration, Refugees and Citizenship Canada. [#WelcomeRefugees: Key figures](#) (11 January 2021)
- Rehaag, S. [2020 Data](#), Refugee Law Lab (2023). This site contains the data Rehaag has collected on decisions by the RPD and RAD from 2006 to 2020
- UNHCRa. [Refugees in Canada](#) (accessed 19 January 2023)
- UNHCRb. [Refugee Data Finder](#) (accessed 18 January 2023)
- Van Haren, I. [Canada’s Private Sponsorship Model Represents a Complementary Pathway for Refugee Resettlement](#) (Migration Policy Institute, 9 July 2021)







Photos: Angeles Zamora / @aromazflores / aromazflores@gmail.com

## It takes a city to **welcome 900 refugees...** and growing

*By Louise Slobodian and Madeleine Nerenberg*

About 70 Ukrainian families came to Kingston in 2022 since their country was attacked. Ten or so Afghan families arrived the year before, when the Taliban regained control and the borders closed. There are hundreds of Syrians in Kingston since their civil war. When a conflict happens in the world, the world comes to Canada. The world comes to Kingston.

When Canada resolved to accept 40,000 Syrians in 2015, the country created Resettlement Assistance Program (RAP) centres in smaller regions to complement those already in big cities. Kingston was one of them, and the

Refugee Resettlement Services Kingston program at KEYS was born.

A RAP centre is specifically for government-assisted refugees, which is a special stream of migration, different from skilled workers, students, even the privately sponsored refugees that churches and groups of five sponsor.

Government-assisted refugees (GARs) arrive as permanent residents and are entitled to study, work, and receive OHIP coverage. The Government of Canada provides modest income support to these newcomers in their first year, and staff in community-

based organizations help with the basic tasks of getting health cards, SINs, and housing; registering for school; finding work; and completing other core settlement tasks. Each adult GAR attends orientation sessions about life in Canada, including information about their health card; vaccinations; COVID-19; emergencies; family doctors; and the [Interim Federal Health Program](#) (IFHP), which pays for a variety of health services for GARs and other newcomers. It is information staff revisit many times over the first year.

KEYS Employment and Newcomer Services provides intensive assistance during a refugee newcomer's first year in Canada. In 2016, 120 GARs settled in Kingston. A small team developed and implemented a program to orient these newcomers, engage volunteers, and make connections. By now, the staff team is larger and so is the target. In 2022, 244 GARs came to Kingston.

More than 900 government-assisted refugees have arrived in Kingston since 2016. This has changed Kingston and is continuing to do so. Many individuals, organizations, and businesses support and interact with these newcomers. Not only do many organizations offer special programs to assist newcomers, hundreds of individuals and couples have come forward as volunteers to round out newcomers' experience by offering friendship.

Beyond overseeing resettlement tasks, KEYS has dedicated programming to help children and youth navigate the school system and to train newcomers in

digital literacy to help navigate bank apps and online classes, and more. Volunteer co-ordinators recruit and train community volunteers and collaborate with community groups like the Rotary Club and Rotaract, organize library tours, and accept donated furniture and household items. KEYS is also dedicated to supporting newcomers with low levels of English to find and maintain employment, offering mentorship to newcomer professionals and helping newcomer youth find their first jobs and think through what school and career path to follow.

### HIGH NEEDS

The Government of Canada selects government-assisted refugees in co-operation with international partners based on their vulnerability. When they arrive, their needs may be many and varied. Some are related to:

- experiencing serious and acute physical conditions and mental health issues including PTSD;
- arriving with little formal education or no literacy skills, even in their own language;
- arriving alone;
- having endured long stays in refugee camps; and
- having survived or witnessed war, persecution, torture, trauma, and other atrocities; or being incarcerated.

*She missed her dad so much; she refused to eat or go to school. A Maltby Centre counsellor helped.*

*He was in a cycle of anxiety and considered ending his life. Crisis services took him seriously.*





In their first year, GARs receive income support consistent with social assistance rates. They are entitled to the Canada Child Benefit and other government supports. Money is tight, and many access the food bank. Like for all of us, rent and food are expensive. This can contribute to culture shock. Many do not expect life to be so hard in Canada or were misled before coming (e.g., one family was led to believe a house was being built for them). Others are surprised and disappointed to learn it may take two or more years to reunite with the spouse or children they had to leave behind. Many arrive hoping to save for their children's education right away or to send funds back home. The reality takes adjustment.

*She was diagnosed with diabetes soon after she was taken on as a patient of the Queen's Family Health Team (QFHT). Newcomers who lived a long time in refugee camps are at a higher risk for diabetes than most as they had access only to few grains in the camps and not their full traditional diets. Families that lived in refugee camps have gone from too little food to having an abundance of choices that include many unhealthy processed options such as sugary and salty snacks. KEYS is currently working with a dietitian to help families who survived refugee camps regain "hunger cues" that were numbed by constant hunger.*

### **NAMES AND DATES**

Little is known when someone is assigned to Kingston through the federal immigration department. An email is sent with names and dates of birth, primary language, flight information, and sometimes a few

health-related details. KEYS staff sometimes need to move quickly to assist newcomers to access immediate medical care for acute health needs, prescriptions, or chronic issues. Sometimes emergency care is required right away.

By far the largest group of government-assisted refugees in Kingston is from Syria. Iraqis, Eritreans, and Afghans, as well as extended families from Sudan and Somalia, are well connected and supporting new arrivals as they come. There is a group of Turkish families. And, in lesser numbers, Kurds, Mongols, Ethiopians, Salvadorans, and others who came to Canada due to persecution, war, and displacement.

The multitude of languages and health-care needs is a challenge. The use of interpreters and language lines is necessary, as is budgeting for their cost. While KEYS staff speak many of the languages of our clients, they are not medical interpreters and cannot take on that role.

Hospital and clinic staff will sometimes turn to aids such as Google Translate in an effort to bridge the language barrier. Such apps are improving in their effectiveness, but still lack the complexity and sensitivity required in a health-care context. Health-care providers who use certified interpretation can communicate effectively with their patients and provide superior quality care. KEYS urges the whole health-care system to invest in certified interpretation services.

*Seven years into GARs arriving in Kingston, there have been accidents, disease, and deaths. KEYS staff have come*



to understand that there are widely differing attitudes to end-of-life care amongst those we serve. Many have never considered removing life support, for example, as it is unheard of in some cultures. Those with strong religious faith might instead pray for a miracle, or the family might wait out the inevitable because that is how it is done at home.

## OUT IN FREEDOM

Many see Canada as a safe place to come out — and to live in freedom. For 30 years, the Canadian immigration system has understood persecution on the basis of gender identity and/or sexual orientation as valid grounds for refugee claims. 2SLGBTQIA+ individuals have arrived in Kingston and found acceptance, even if the road remains difficult. Sometimes that means mixing more with mainstream culture than with their national, ethnic, or religious cultures where there can be bias and barriers. That can be lonely if you're not yet good at English or French and don't have a common language to connect.

There is a lot of joy, though. 2SLGBTQIA+ newcomers are finding each other. They are finding doctors and clinics that help so much, including with trans-affirming health care, through the QFHT, Trellis HIV & Community Care, the Sexual Health Resource Centre at Queen's, and Kingston Community Health Centres

(KCHC). Community volunteers, including queer folks, have embodied welcome.

## COMMUNITY SUPPORT VITAL

To come to Canada, GARs must have basic vaccinations and health testing through the International Organization for Migration. In the first year here, public health follows up to ensure vaccines are up to date and provides infectious diseases testing and follow-up for tuberculosis. Settlement staff throughout Canada upload proof of COVID and other vaccines to public health portals and interpret changing regulations to clients as needed.

*He was itchy back there. More and more. Something wasn't right. He got tested for worms. Then so did his roommates. Pinworms. Ugh. Medication and washing everything thoroughly to the rescue. They told everyone who had been in asylum with them. Everyone got tested. Everyone feels better.*

Kingston Community Health Centres has embraced this complex population, as per their mandate. KEYS and KCHC have had a strong partnership since the creation of Immigrant Services Kingston & Area (ISKA) and the Kingston Immigration Partnership. The KCHC medical clinic rosters many newcomers, and a few clients find a doctor through HealthCare Connect. Most GARs get referred to the QFHT or



**The multitude of languages and health-care needs is a challenge. The use of interpreters and language lines is necessary, as is budgeting for their costs.**





KCHC for primary care based on their level of need, with priorities for individuals with chronic or acute conditions, pregnant women, trans folks, and others with unique needs. The QFHT now has a newcomer clinic to support this work. Families with developmentally affected members find support through organizations such as Kids Inclusive, Extend-A-Family, and other programs. Walk-in clinics such as CDK are a vital part of the mix.

The care of the vulnerable is a communal responsibility. It is a responsibility implied in Canada's humanitarian programs, one that goes hand in hand with the increased levels of immigrants coming to Canada for a new life — and to relieve labour shortages. Recognizing this shared responsibility, KEYS acknowledges the shared commitment so many individuals, groups, organizations, and institutions in the community have shown. It takes a city ....

While a few organizations and services are named here, the reach of support for newcomers is much larger and spreads across the region.

*He'd been caught by a bomb and needed a new hip. That could be arranged. But what about his neighbour? That guy doesn't sleep very well because he's worried what would happen to his kids. He'd seen too much.*

**The care of the vulnerable is a communal responsibility. It is a responsibility implied in Canada's humanitarian programs.**



## **IF YOU OFFER HEALTH CARE, PLEASE REGISTER FOR THE IFHP**

The federal government offers GARs, asylum seekers, and certain other groups of newcomers health benefits through Medavie Blue Cross as part of the Interim Federal Health Program (IFHP) in their first year in Canada. The plan pays for prescriptions, tooth fillings and extractions, physio and other therapies, eye checks and glasses, hearing aids, orthotics and mobility aids, and more.

Providers must register for the program, which offers health providers an online centre and a phone line that answers quickly.

There is currently a particular need for physiotherapists and always for dentists. Previously, the rates were considered low and payment slow, but that is no longer the case. This system helps GARs get the help they need to succeed. Please register on the [Medavie website](#) and let KEYS know you have registered.

For more information about the services KEYS provides, please visit the [KEYS website](#) or call [613-546-5559](#).

*Louise Slobodian is a resettlement case manager and Madeleine Nerenberg is the director of newcomer services with KEYS.*



# “Home”

A poem by Warsan Shire

*Reprinted courtesy Facing History and Ourselves*

British-Somali poet Warsan Shire gives voice to the experiences of refugees in this poem about “home.”

Warsan Shire was born in Kenya to Somali parents and lives in London, England. She is a poet, writer, editor, and teacher. In 2013-2014, she was the Young Poet Laureate for London. Shire wrote “Conversations about home (at a deportation centre)” in 2009, a piece inspired by a visit she made to the abandoned Somali Embassy in Rome, which some young refugees had turned into their home. In an interview, she told the reporter that “The night before she visited, a young Somali had

jumped to his death off the roof.” The encounter, she says, opened her eyes to the harsh reality of living as an undocumented refugee in Europe: “I wrote the poem for them, for my family and for anyone who has experienced or lived around grief and trauma in that way.”<sup>1</sup>

This poem became the basis for “Home,” printed here. “Home” has been shared widely across the media and has been read in a range of public spaces, including London’s Trafalgar Square. Commentators have noted that “Home” has touched a nerve among people, that it has offered a way to give voice to refugees and to provide some authentic understanding of the crisis.





## Home

no one leaves home unless  
home is the mouth of a shark  
you only run for the border  
when you see the whole city running as well

your neighbors running faster than you

breath bloody in their throats  
the boy you went to school with  
who kissed you dizzy behind the old tin factory  
is holding a gun bigger than his body  
you only leave home  
when home won't let you stay.

no one leaves home unless home chases you  
fire under feet  
hot blood in your belly  
it's not something you ever thought of doing  
until the blade burnt threats into  
your neck  
and even then you carried the anthem under  
your breath  
only tearing up your passport in an airport toilet  
sobbing as each mouthful of paper  
made it clear that you wouldn't be going back.

you have to understand,  
that no one puts their children in a boat  
unless the water is safer than the land  
no one burns their palms  
under trains  
beneath carriages  
no one spends days and nights in the stomach of a truck  
feeding on newspaper unless the miles travelled  
means something more than journey.  
no one crawls under fences  
no one wants to be beaten  
pitied

no one chooses refugee camps  
or strip searches where your  
body is left aching  
or prison,  
because prison is safer  
than a city of fire  
and one prison guard  
in the night  
is better than a truckload  
of men who look like your father  
no one could take it  
no one could stomach it  
no one skin would be tough enough

the  
go home blacks  
refugees  
dirty immigrants  
asylum seekers  
sucking our country dry  
niggers with their hands out  
they smell strange  
savage  
messed up their country and now they want  
to mess ours up  
how do the words  
the dirty looks  
roll off your backs  
maybe because the blow is softer  
than a limb torn off

or the words are more tender  
than fourteen men between  
your legs  
or the insults are easier  
to swallow  
than rubble  
than bone  
than your child body  
in pieces.  
i want to go home,  
but home is the mouth of a shark





home is the barrel of the gun  
and no one would leave home  
unless home chased you to the shore  
unless home told you  
to quicken your legs  
leave your clothes behind  
crawl through the desert  
wade through the oceans  
drown  
save  
be hunger  
beg  
forget pride  
your survival is more important

no one leaves home until home is a sweaty voice in your ear  
saying-  
leave,  
run away from me now  
i dont know what i've become  
but i know that anywhere  
is safer than here <sup>2</sup>

In an interview after she won the Brunel University African Poetry Prize, Warsan Shire was asked to talk about her sense of commitment to substance and urgent subject matter in her work. In response, Shire said:

"I'm from Somalia where there has been a war going on for my entire life. I grew up with a lot of horror in the backdrop — a lot of terrible things that have happened to people who are really close to me, and to my country, and to my parents; so it's in the home and it's even in you, it's on your skin and it's in your memories and your childhood. And my relatives and my friends and my mother's friends have experienced things that you can't imagine, and they've put on this jacket of resiliency and a dark humour. But you don't know what they've been victims of, or what they've done to other people. Them being able to tell me, and then me writing it, it's cathartic, being able to share their stories, even if it is something really terrible, something really tragic. Sometimes I'm telling other people's stories to remove

stigma and taboo, so that they don't have to feel ashamed; sometimes you use yourself as an example." <sup>3</sup>

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*Facing History and Ourselves, "Home by Warsan Shire," last updated May 4, 2022.*

*This reading contains text not authored by Facing History and Ourselves. See footnotes for source information.*

## FOOTNOTES

1. Marta Bausells and Maeve Shearlaw, "Poets speak out for refugees: 'No one leaves home, unless home is the mouth of a shark,'" *The Guardian*, September 16, 2015
2. Warsan Shire, "Home," Seekershub.org, September 2, 2015, accessed August 24, 2016
3. Katie Reid, "Q&A: Poet, writer and educator Warsan Shire," African Words blog, June 21, 2013, accessed September 13, 2016





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