

Understanding the Experience of Latin American Asylum-seeking Women in Quebec:  
A Feminist Approach

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## **Abstract**

This thesis consists of two chapters. The first paper is a theoretical reflection about the relationship between feminist scholarship and the field of refugee mental health research. Here, I argue that feminist approaches can contribute to refugee mental health research by questioning some of its epistemological boundaries and assumptions, by rendering marginalized communities visible and amplifying their voices, and by recognizing the social and political implications of this type of research, in an attempt to align academia and activism in ways that are relevant for the implicated subjects.

The second paper is an empirical research paper drawing from a qualitative study conducted with nine women asylum seekers from Latin America in which a feminist approach undertaken. It contributes to the current research on refugee women by examining the narration of the lived experience of Colombian and Venezuelan women arrived in Quebec as asylum claimants in terms of their corporeality. Drawing from in-depth interviews with these women, I argue that mental health and wellbeing are not disembodied, but rather anchored in gender roles, practices, rituals, and norms that have a corporeal dimension and are culturally specific. Considering the place of the body in the experience of migration implies examining its sensorial, tactile, somatic and kinesthetic dimensions. This brings about new possibilities for a critical analysis of the intersections between gender, wellbeing and asylum.

## Résumé

Cette thèse est composée de deux chapitres. Le premier est une réflexion théorique sur la relation entre la recherche féministe et le domaine de la recherche sur la santé mentale des réfugié.e.s. Je propose que les approches féministes peuvent contribuer à la recherche sur la santé mentale des réfugiés en remettant en question certaines limites et postulats épistémologiques propres à cette discipline, en rendant les communautés marginalisées visibles et en amplifiant leurs voix, ainsi qu'en reconnaissant les possibles implications sociales et politiques de ce type de recherche, avec l'intention d'aligner l'académie et l'activisme d'une manière qui soit pertinente pour les sujets impliqués.

Le deuxième article est une recherche empirique s'inspirant d'une étude qualitative menée auprès de neuf femmes Latino-américaines demandeuses d'asile, au cours de laquelle j'ai eu recours à une approche féministe. Il contribue à la recherche actuelle sur les femmes réfugiées en examinant, en termes de corporalité, la narration de l'expérience vécue de femmes colombiennes et vénézuéliennes arrivées au Québec comme demandeuses d'asile. À partir d'entrevues en profondeur avec ces femmes, je soutiens que la santé mentale et le bien-être ne sont pas désincarnés, mais plutôt ancrés dans des rôles, des pratiques, des rituels et des normes de genre qui ont une dimension corporelle et sont spécifiques à leur culture. Considérer la place du corps dans l'expérience de la migration suppose d'examiner ses dimensions esthétiques, sensorielles, tactiles, somatiques et kinesthésiques. Cela ouvre de nouvelles possibilités pour une analyse critique des intersections entre le genre, le bien-être et l'asile.

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### **Contribution of authors**

The Settlement Study (Hanley et al., 2021) provided contact information of potential participants who had previously been interviewed by other members of the team and who had agreed to be contacted again for future research. They also supported my research through supermarket vouchers that were given to the participants as a way of thanking them for their time and participation. Under the guidance of Dr. Cécile Rousseau and Dr. Janet Cleveland, I personally contacted and interviewed all the participants, transcribed and analyzed the data and wrote the two chapters of this thesis.

## Introduction

Globally, there are an unprecedented estimated 82.4 million forcefully displaced people, of which 26.4 million are refugees and over 4 million are asylum-seekers (UNHCR, 2020).

An asylum-seeker is someone whose request for refuge has yet to be processed, which leaves them in a particularly precarious situation as not only is their immigration status insecure, but they also face challenges that depend on the complex intersections between the particularities of their migratory trajectories and other axes of their identity, such as gender, social class, nationality, age, sexual orientation, etc.

Yet, the discourse about refugees and asylum-seekers, particularly outside of specialized academic discussions, still overgeneralizes and homogenizes this population, often overlooking subjective and individual realities and even leading to stereotyping and social polarization.

As many authors have stated, structural vulnerability should not be conflated with individual weakness, ill mental health or lack of agency (Clare, Goodman, Liebling, & Laing, 2014; Cuthill, 2017). Although scholarship on refugee women has expanded in recent years, research that focuses on their lived experiences and their wellbeing is still largely absent. As Robert F. Barsky has noted, women refugee claimants face “inherent obstacles, often related to the representation of the self in language” (2017, p. 289).

In my view, a research perspective relying on feminist values may be appropriate to address these concerns. Even though there are many strands within feminism, Singh et al. (2021) explain that

feminists are united in seeking to address unequal power hierarchies and striving for social and environmental justice. Feminist researchers advocate for intersectional analysis that centres the voices and knowledge of communities, embedding decolonial lenses and ethics of care approaches that value people more than they value data. Feminist research explicitly examines

gendered and colonial power hierarchies at play in the research process, and is grounded in reciprocal engagement with communities to equalise power dynamics. (p. 561)

Thus, a feminist analysis in refugee studies would critically examine gender as one of the key dimensions of identity and focus on how it intersects with migratory experiences.

This thesis aims to bring some contributions from the critical framework of gender and feminist studies to the field of refugee mental health research. I propose to do this, first, by examining the contributions of feminist scholars to the fields of refugee studies and psychiatry and, second, by centering the voices and experiences of women asylum seekers.

Article 1 consists of a theoretical reflection on the relationship between gender, migration and mental health. Drawing from queer and feminist perspectives, Mad studies and disability studies, I argue for an interdisciplinary approach that problematizes some of the epistemological assumptions in refugee studies and psychiatry. This essay was awarded the McGill Refugee Research Group (MRRG) Essay Prize in June 2021.

Considering that there are relatively few studies about refugee women that adopt an intersectional and feminist perspective while foregrounding a narrative analysis that focuses on subjective life stories, Article 2 presents an empirical study conducted between 2019 and 2021 as part of my master's thesis research. Here, I undertake a feminist materialist approach to inquire about the embodied experience of nine women asylum seekers from Colombia and Venezuela.

## **Article 1**

### **Towards a Feminist Standpoint in Refugee Mental Health Research**

Laura Gallo Tapias

#### **Abstract**

Historically, psychiatry has been criticized by feminist activists and scholars as a male-dominated, antiwoman field (Dodd, 2015). Especially in the context of forced migration, the psychiatric medical model of illness trivializes the social realities and experiences of women and other disenfranchised groups. I argue that feminist approaches can contribute to refugee mental health research by questioning some of its epistemological boundaries and assumptions, by rendering marginalized communities visible and amplifying their voices, and by recognizing the social and political implications of this type of research, in an attempt to align academia and activism in a way that is relevant for the implicated subjects.

This paper includes 1) an outline of some contributions that feminism has brought to the field of refugee mental health research, 2) a critical reflection on the intersections between psychiatry and migration studies, highlighting how gender has been read as a category used solely to compare differences between sexes in the medical sciences and 3) a discussion about future directions for broadening the scope of refugee mental health research by recognizing the political stakes in the production of “scientific” knowledge about refugees.

## Introduction

In a recent article, activist and writer MSunnia considers how queer and trans perspectives may expose migration studies to new ways of reimagining concepts such as migration, diaspora, borders, kinship and economics (2020). She argues that overturning and complicating heteronormative understandings of these categories “facilitates for wider possible inquiries in migration studies” (2020, p. 321). Following this line of thought, I would like to reflect in this essay about how traditionally narrow epistemological frameworks in the field have been and can potentially further be enlarged and enriched by assuming a feminist perspective. I will focus on the domain of refugee mental health research and discuss how this approach may complicate issues of gender, power and identity.

I argue that feminism is useful not only to understand women’s migration, but as a theoretical framework that contextualizes, historicizes and challenges established notions of gender, migration and mental health, bringing to the fore the voices of marginalized and underrepresented subjects. As I understand feminism as one among many valid approaches to deepen our understanding of the refugee predicament, my intention is not to advocate for a particular paradigm shift but rather to open up a dialogue across disciplines that don’t often talk - or listen - to each other.

Historically, psychiatry has been criticized by feminist activists and scholars as a male-dominated, antiwoman field (Dodd, 2015). Similarly, from this perspective, migration studies have been associated with a narrow understanding of identity, defined by methodological nationalism, that is, the assumption that nationality is the key determinant of identity (Wimmer & Glick Schiller, 2002, cited by Palmay, 2018). As she discusses the interplay between psychology and migration studies, Ingrid Palmay criticizes this assumption, claiming that

“identity may map far more meaningfully onto language, race, ethnicity, or urban/rural status than it does to citizenship” (Palmary, 2018, p. 9). A feminist analysis would center gender as one of the key dimensions of identity and focus on how it intersects with migratory experiences.

This text outlines some contributions that feminism has already brought to the field of refugee mental health research. I propose a critical reflection on the intersections between psychiatry and migration studies, highlighting how gender has been read as a category used solely to compare differences between sexes in the medical sciences. To conclude, I will propose some future directions for a feminist research agenda in refugee mental health.

### ***Hostile Knowledge***

Feminist scholar and novelist Siri Hustvedt’s argues that theoretical models are nothing but frames for viewing, which alter or distort what is seen. The problem, for her, is not that these filters exist, but that they have been and continue to be organized in a hierarchical way: “in our world, the disciplines considered hard have an implicit, if not explicit, superiority” (Hustvedt, 2017). She calls attention to the fact that interdisciplinarity forces us to focus on “the place where we sever one thing from another” in scholarly life (p. 343), where the academic taxonomies are vulnerable at their site of incision. Even though contemporary scholarship has advanced an imperative of interdisciplinary collaboration, hierarchies of knowledge are still present in academia, silencing or ostracizing the areas of knowledge that might destabilize mainstream ways of theorizing and doing research and that are thus considered problematic.

For many decades, feminism has been vocal in condemning the colonial, sexist, ableist and racist biases that have historically marked scientific pretensions of objectivity. Donna Haraway defines “hostile sciences” as discourses enunciated by an abstract masculinity, which she refers to as a disembodied, conquering gaze that claims “the power to see and not be seen, to

represent while escaping representation. This gaze signifies the unmarked positions of Man and White” (Haraway, 1988, p. 581). She proposes instead the concept of “situated knowledges” to move toward a paradigm that recognizes how any scientific discourse is always situated in a particular social, historical, and geographical context from which it cannot be removed, as it is inscribed in concrete relations of power.

Similarly, other feminist standpoint theorists such as Nancy Hartsock, Dorothy Smith and Patricia Hill Collins have underlined the epistemological erasure of women that this knowledge paradigm entails, whilst insisting on the political stakes in recognizing the multiplicity of these subjectivities and reclaiming their points of view as valid (Hekman, 1997). Although mental health as a topic of interest pertains many disciplines beyond psychiatry, I will focus primarily on it because of its status as a “hard”, and sometimes even hostile, science.

### ***Feminist Critique of Psychiatry***

In North America and Europe, the 70’s were a particularly controversial period for the “psy sciences”. This was partly due to the increasing questioning of psychoanalysis, which led to a turn towards a positivist paradigm that centered biomedicine as the only causal explanation of mental illness and established discrete categories of normality and abnormality (Angel, 2012). The critical examination of the DSM, the American Psychological Association’s handbook that classifies mental disorders, raised many questions about the political consequences of the medicalization of life, which was seen as entangled with prescriptive notions of morality and social behavior. This elicited an intense response from many feminist scholars and activists, who denounced the profound control of female sexuality that was present in the medical discourse.

This critique has accosted psychiatry as a patriarchal and capitalist system that oppresses women both as mental patients and *as women* (Chamberlin, 1975)<sup>1</sup>. For many theorists, psychiatry as an institution is and has historically been central to social practices of control that rely on a tradition of medicalizing behavior, resulting in the perpetuation of epistemological and institutional logics of systematic regulation, criminalization and exclusion of certain groups (Foucault, 2003; Smith, 1976).

Feminist scholar Meredith Kimball suggests that, as the group that holds this power are white, middle-class males, “other groups (middle class women and women and men from different class, ethnic and racial groups) are compared to the dominant standard” (p. 123). This is of course relevant in terms of studying the mental health of refugees, as racial and cultural tensions are paramount in the shaping of “mental disorder”.

Often, adjustment to normative social roles and expectations has been viewed as the standard definition of mental health (Kimball, 1975). These definition of what constitutes acceptable or desirable psychological functioning poses the following questions: is adjustment for women more difficult than it is for men? Could this be one of the reasons that explain women’s psychiatric oppression? This is to say, is the definition of mental health, technically posed as a neutral, scientific construct, inherently exclusionary? And what about the context of forced migration and the challenges it entails in terms of adjustment, loss and exile?

To summarize, feminist efforts to criticize and resist psychiatry include, on one hand, the intent to reveal and challenge its epistemological fault lines and, on the other, the aim to contextualize emotional distress and other aspects of women’s experience, both culturally and

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<sup>1</sup> Although scholars from across the globe have contributed to advance this critique, I will focus on the tensions that are particular to the contemporary North American context. For a more detailed analysis of the historical relationship between psychiatry and feminism, see Nancy Tomes’ chapter “Feminist Histories of Psychiatry”, in *Discovering the History of Psychiatry* (1994).

structurally, to transcend psychiatric oppression. While some scholars argue against the very concept of mental illness, others support the idea that there are “better ways” to categorize psychological suffering. One key contribution from feminist thought to the theorizing of mental health that extends to the field of refugee mental health research is the fact that it has developed a framework that seeks to juxtapose psychiatry with politics (Dodd, 2015), hence blurring the separation between “objective” knowledge and subjective realities by calling attention to the very real consequences that such categorization has on the lives of the people implicated in it.

Finally, as noted by Shaindl Diamond (2014), feminist activism has also contributed to the establishment of non-medical services like shelters and counselling centers for survivors of gender-based violence, thus relocating mental health in a community context that acknowledges the social consequences of abuse, trauma and oppression. This highlighted the importance of providing services beyond medical attention, which has served as a model for newcomer welcome centers and community organizations, which are a fundamental structure of support for asylum-seekers and refugees.

### ***Feminism and Migration Studies***

Although there has been a growing visibility of women in migration studies, quantitative inquiry tends to view “men” and “women” as discrete categories that can be compared, which has been called the “add and stir method”. Some authors have stated that this is an important starting point for a dynamic gender analysis but does not account for the complex interplay of power and gender identity (Timmerman, Martiniello, Rea, & Wets, 2015). As is the case with psychiatric inquiry, paying attention to gender as a category that solely refers to the comparison between the biological sexes can lead to invalid and simplistic interpretations of reality and sometimes even risky categorizations that trivialize the complexity of human identities and

experience. A perspective that assumes gender as a social construct (Tomes, 1994) is still largely absent from general scholarship.

In the 70's and 80's, feminism was pivotal in calling attention to how the term "migrant" seemed to be viewed as a uniform category, thus ignoring or obscuring the experience of women and other marginalized subjects. Feminist theory views gender as relational and problematizes its borders and meanings. Its influence propelled research that would eventually shift towards a gender perspective that understands femininity and masculinity as evolving and dynamic social constructs (Mahler & Pessar, 2006). Nonetheless, most of the work in migration studies that assumes a feminist perspective comes from the field of geography and doesn't deal with mental health directly (Nawyn, 2010; Tollefsen Altamirano, 1997).

### ***Psychiatry, Gender and Forced Migration***

Refugee Mental Health Research is the branch of the "psy sciences" that specializes in the mental health of international forcefully displaced persons. Most of the medical and psychological scholarship on displacement and mental health focuses on trauma responses - especially in terms of PTSD - as well as on clinical interventions among refugees. However, it has been critiqued as a perspective that fails to recognize that "coping is a transaction between individuals in different situations who have relationships with particular stories" (Kleinman, 1988, p. 66). Refugee research, particularly when framed as psychiatric inquiry, may replicate the scientific discourse that operationalizes and quantifies psychological phenomena instead of dealing with the complexity of the social and subjective realities of refugees. Contemporary debates about the decolonization of psychiatry have underlined how western biomedical models that rely on causal explanations of mental disorder tend to exclude, obscure and pathologize the accounts of feminized and/or racialized subjects.

Forced migration has been described from within this paradigm as one of the harshest multiple-loss experiences, which can have a profound impact on psychosocial adjustment and wellbeing. Besides carrying past stories that often involve violence, loss and persecution, asylum-seekers and refugees have to adapt to a new culture and assimilate into a society that is often discriminatory, distrustful and sometimes overtly hostile towards newcomers. To use traditional psychiatric terms, this group is thus at an elevated risk for psychopathology (Bäärnhielm, Laban, Schouler-Ocak, Rousseau, & Kirmayer, 2017; Shultz et al., 2014),

Although refugees and asylum-seekers are a particularly vulnerable group among the different categories of migrants (Beiser & Hou, 2017; Bhuyan, Osborne, Zahraei, & Tarshis, 2014), the emphasis on vulnerability and risk factors that is common in mainstream psychiatry often obscures the complexities and contradictions of this lived experience. Even after enduring hardship, most refugees are not traumatized or impaired: they display a wide set of creative and resilient ways of dealing with the challenges they face. Thus, it is not enough to think about experience only in terms of suffering or disfunction. As psychiatrist Arthur Kleinman states it, psychiatry needs to situate the individual in her particular contingencies to recognize that “there is a dynamic interaction between historical context, local social system, and personal experience” (1988, p. 66). He proposes to follow an anthropological perspective that exceeds reductionist epidemiological categorizations, and western notions of “normal” psychological functioning, in particular. This argument echoes the ideas posited by feminist standpoint theory, which centers on lived experience and concrete material circumstances as paramount in the study of social and psychological realities.

### ***Towards a Feminist Standpoint in Refugee Mental Health Research***

Feminists have sought to advance a critique that decolonizes and decenters biomedical oppressive paradigms of normality and abnormality with the aim of depathologizing women's responses to trauma and oppression (Diamond, 2014; Tomes, 1994). Challenging the medicalization of women's distress and coping is still central to contemporary feminist resistance to psychiatry. Such an endeavor has been undertaken by scholars coming from a wide array of disciplines, including mental health professionals (Herman, 2015), medical anthropologists (Pandolfo, 2018) and psychiatric survivors themselves (E. W. Wang, 2019), to name a few.

In recent years, feminist views of mental health and social justice have moved beyond women's oppression but have also discussed, from a broader decolonial and social justice lens, the systems and practices that shape mental health. These claims intersect with other critical perspectives, such as those advanced by queer, indigenous, disability, post-structural, critical race and mad studies scholars. Currently, there is a growing effort to integrate these approaches. One example is *Critical Inquiries for Social Justice in Mental Health*, a Canadian volume that gathers a multiplicity of anti-oppressive approaches to mental health (Morrow & Malcoe, 2017).

Bringing a feminist lens to the intersections between psychiatry and migration studies requires, then, "a loosening of disciplinary boundaries and engagement with areas of possible connection rather than presuming these connections already exist" (Palmary, 2018, p. 4). Taking such an angle could contribute to a more nuanced understanding of the gendered experience of forced migration that transcends the dichotomy between normalcy and disorder.

Hence, thinking about the mental health outcomes of forced displacement in line with a feminist critique of psychiatry implies viewing it as a complex and ambivalent process of negotiation between multiple, evolving and fragmented identities and relations of power, recognizing how the experience of women has been historically and structurally defined by

gender inequality. Bringing to the fore a gendered account of refugee mental health research problematizes the positivist assumptions of biomedicine and frames forced migration as a contradictory reality that can be both emancipatory and subjugating for women (Yakushko & Espín, 2010b). Some of the oppressions that migrant women face in their country of origin, such as gender-based persecution, past lack of opportunities due to patriarchal traditional gender roles and the widespread use of sexual violence as a strategy of war are still largely ignored, particularly when it comes to understanding their larger social and political meanings for the migrant women.

Although refugee mental health research has recognized the importance of post-settlement factors contributing to mental health outcomes, only recently has it started to pay attention to the post-migration challenges that are particular to women. Prejudice and exclusion in the host society, as well as new and sometimes unfamiliar expectations regarding their participation and involvement in the spheres of family, work and community, might further undermine their sense of agency and their possibilities of political participation. Indeed, “traditional patriarchal contexts have always provided the opportunity to carve separate - if inferior- spaces for women. The cultural transformations brought about by migration upset these spaces without yet giving women full access to equal power in the public sphere” (Yakushko & Espín, 2010b, p. 545)

Compounded with the psychological challenges resulting from exposure to loss, trauma and discrimination are some geographical and administrative obstacles that contribute to making the granting of asylum an ordeal (Fassin, 2013). As Didier Fassin puts it, refugees who come to the Global North must endure a strenuous assessment of their situation: they face a particular regime of recognition, one that scrutinizes their situation in order to confer them the legal and

social acknowledgement of victimhood, demanding univocal proof of hardship to grant them access to the much-valued care of the state. Mental health professionals, and psychiatrists in particular, play an important role in this process as they lend their “scientific” expertise to the legal system, which is then used to argue for or against the person in the process of seeking asylum. This contributes to making it a healthified process (Morrow, 2017), which can in turn further pathologize the experience of the asylum claimant.

This legal claim situates the person in a position of uncertainty and disenfranchisement. The precarity of their migratory status in a contradictory system that “discredits and stigmatizes refugees while officially defending the doctrine of protection” (Fassin, 2013, p. 26) is accentuated by the demand that they prove and justify their claim in the context of a hearing. In many cases, asylum claimants must repeatedly revisit potentially traumatic memories, often related to past experiences of gender-based violence and sexual abuse, to make their prerogative “acceptable” and legible (Crawley, 2001; Johnson, 2011). This creates a patriarchal logic that poses specific obstacles for women, inscribing them as hypersexualized objects in a moral geography of tyranny (Barsky, 2017; Fassin, 2013).

### ***Future Directions***

In this paper, I have considered how feminist scholarship may contribute to nourish the field of refugee mental health research through the questioning of epistemological boundaries and assumptions, the visibilization of marginalized communities and the amplification of their voices, and the attempt to align academic and activism in a way that is relevant for the implicated subjects. In the following section, I wish to highlight some concrete ways in which queer, feminist, psychiatric and migration scholarship can articulate to align with a paradigm of social justice, in order to shift “the very discourse of ‘mental health’ from the reigning biomedical

model to a paradigm of social provision, human justice, and valorization of diversity” (LeFrançois, Menzies, & Reaume, 2013, p. 9). I discuss the importance of loosening disciplinary boundaries through interdisciplinary work, as well as the potential value of qualitative critical approaches to mental health research.

**Aiming for interdisciplinary work: Mad Studies and intersectionality.** Recently, there has been a recognition of the need for interdisciplinary collaboration in research. On one hand, even in works that deal specifically with the experience of women from a feminist perspective, the cultural and contextual particularities often remain unexplored. As Judith Butler expresses it, “the notion of a universal patriarchy has been widely criticized for its failure to account for the workings of gender oppression in the concrete cultural contexts in which it exists” (2006a, p. 3). On the other hand, scholarship that deals with cultural difference tends to reinforce stereotypical and statistical views of gender roles. Yet, as Diamond (2014) explains,

Deconstructing the reasons why women experience higher rates of ‘symptoms’ associated with various diagnoses can help to shed light on why people of various genders and social locations might have similar experiences of social distress (...). Such understandings can illuminate gendered social relations; the ramifications of inequality and discrimination; and how these cultural, social, and material realities shape the psychological experience of humans. Likewise, understanding how madness is theorized and treated helps to provide insight into cultural expectations of gender and gender roles (p. 198).

The field of Mad Studies seeks to complicate cultural constructions of otherness, femininity and madness, and stresses “the multiple ways in which capitalism and patriarchy

frame and reproduce psychiatric subjugation” (LeFrançois et al., 2013)<sup>2</sup>. By taking a critical and interdisciplinary stance towards psychiatry as a social and cultural institution of control, Mad Studies could be useful to think about refugee mental health, as it allows for an understanding that is not seen as separate from the cultural and political logics that shape the migration experience. This provides a more comprehensive framework that is useful to situate refugee mental health in the context of the contemporary globalization of asylum and the political logics of national sovereignty, immigration law, social polarization and humanitarian discourses.

Morrow (2017) argues that an intersectional Mad Studies approach might be a way of producing liberatory knowledge, social change, and social justice in mental health. Following this claim, I believe that Mad Studies can be relevant to develop a feminist mental health research framework at least in two ways: first, because it situates psychiatry in the broader context of the relationship between the individual and the state, stressing the political and societal dimensions of mental health. In this sense, it is useful to reflect about the ways in which marginalized groups, such as asylum seekers and refugees, tend to be implicitly psychiatrized so that cultural difference is often equated to madness in the eyes of the dominant group.

### **Turning to qualitative methodologies: the case of feminist interpretive inquiry.**

Qualitative methodologies, although undervalued in social research, have contributed to understand the context-bound nature of experience and to bring forward the dynamic and relational nature of identity. In recent years, psychiatry scholars have begun to recognize the significance of qualitative approaches to situate and validate diagnostic constructs in different

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<sup>2</sup> Mad Studies has been described as an interdisciplinary field that incorporates all that is critical of psychiatry from a radical socially progressive foundation in which the medical model is dispensed with as biologically reductionist whilst alternative forms of helping people experiencing mental anguish are based on humanitarian, holistic perspectives where people are not reduced to symptoms but understood within the social and economic context of the society in which they live (LeFrançois et al., 2013, p. 2).

cultural contexts. I believe that this approach is necessary not only to make current psychiatric explanations culturally relevant to different groups and locations, but to challenge the epistemological assumptions that reify mental disorder from a “hostile” science perspective. Feminist theories and methods could further inform a future research agenda that considers the intersections between psychiatry and other disciplines. This resort to “soft” or “womanly” perspectives creates a counterpoint to the hard, tough, verifiable and rigorous “truths” of medical and epidemiological science.

Situated within this framework, a feminist interpretive understanding of refugee mental health research sees forced migration not in terms of vulnerability to psychopathology, statistical correlates of mental disorders or even prevalence of psychosocial suffering, but “as lived experience through the eyes of women” (Jansen & Rae Davis, 1998). Rather than engaging in a research paradigm that reinforces ontological disempowerment, a feminist interpretive stance would be concerned with questions as the following: what does the reality of claiming refuge look like from the eyes of those implicated in it? how can the researcher seek to “engage with both the topic and the participants by taking a feminist standpoint” (Yakushko & Morgan-Consoli, 2014)?

Gender is viewed here as an ongoing process through which people ascribe meaning to the sex binary (Mahler & Pessar, 2006). Assuming that people make sense of their experience through a narrative interpretation of the world (Gergen, 2005; Somers, 1994b), the aim is to comprehend the ways in which refugees narratively construct their lived experiences in a way that accentuates storytelling and listening as valid scholarly methods. Such understanding can provide relevant insights for the study of the dynamic relation between gender, mental health and migration.

As the goal of this approach is to increase understanding and to hold space for respectful conversation as an attempt to “honor voice and visibility” (Jansen & Rae Davis, 1998) rather than to provide causal explanations, it draws on epistemological approaches that privilege listening to diverse voices and promote the visibility of marginalized groups, such as life-writing (Simplican, 2017), feminist oral history (Srigley, Zembrzycki, & Iacovetta, 2018), critical social psychology (Pérez Troncoso & Piper Shafir, 2015) . Besides recognizing the centrality of the impact of gender and power to women’s experience, which is essential to any kind of feminist scholarship, interpretive inquiry also tries to understand phenomena from the perspective of those involved. By supplying a context of experience, this framework brings forward the words of silenced and disenfranchised groups and promotes trust building in the relationship between the researcher and the participants.

Another possibility lies in the use of participatory and arts-based methodologies in psychiatric research. The use of arts-based methodology “provides opportunities to see new portraits of phenomena, diversifies our perspectives, and emancipates the gaze through which we approach the world around us” (Barone & Eisner, 2011, cited by (Q. Wang, Coemans, Siegesmund, & Hannes, 2017, p. 13). Some researchers advocate for this as an inherently feminist methodology (Foster, 2007). Indeed, a feminist ethics of care can guide refugee mental health in finding new ways to empower refugees and asylum seekers and transcend the view of immigrant women as passive subjects (de Billy Garnier & Lavallée, 2018).

### **Concluding Remarks**

The emergent fields of global mental health and cultural psychiatry have contributed to challenging epistemological notions of universal objectivity, which can be understood in terms of Haraway’s metaphor of the conquering gaze. Nonetheless, most of the research that focuses

on the gendered dimensions of mental health, and feminist scholarship on forced migration in particular, are to be found elsewhere. The problem, in my view, is not that these perspectives are absent or nonexistent, but that they do not easily find a way into mainstream discourses around refugee studies.

In this paper, I have revised some of the critiques that feminists and other scholars have made to psychiatry. I propose that seeing the experiences of asylum claimants and refugees through a feminist critical lens may shift the focus away from individual psychopathology and underscore the complexity of psychological experiences of migration.

In her 1975 essay “Women and Psychiatry”, Dorothy Smith asks, in reference to the silencing of women’s voices by the authoritative discourse of psychiatry:

How then may women understand their situation? What vocabularies and concepts are available to them to think about their world and to speak from their experience? How can they formulate their lives and feelings so that they can speak to one another of what they have in common, make claims, speak with authority of their condition and recognize themselves fully in what is said? (Smith, 1976, p. 4).

Even though fifty years have passed, I find these questions to be profoundly relevant to think about current debates about gender, migration and psychiatric epistemology.

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## Bridge

Two of the central questions in Article 1 were: what does the reality of claiming refuge look like from the eyes of those implicated in it? how can the researcher “engage with both the topic and the participants by taking a feminist standpoint” (Yakushko & Morgan-Consoli, 2014)?

Article 2 intends to respond to these questions by developing a practical application of some of the feminist principles discussed in the first paper. Through in-depth interviews with nine women asylum seekers from Latin America, it seeks to decenter notions of psychiatric pathology and mental distress by focusing on women’s agency and creativity; it engages with feminist qualitative research methodologies, bringing to the fore a feminist interpretive inquiry framework. More specifically, I seek to build on this framework by listening to the themes and experiences that are relevant to the interviewees themselves. As concerns with the body were salient in their accounts of migration and resettlement, I ask: how can corporeality be used as a framework to think about women’s experience of asylum?

## Article 2

### Understanding the embodied Experience of Latin-American

#### Asylum-seeking Women in Quebec

Laura Gallo Tapias

#### Abstract

This paper contributes to the current research on refugee women by examining the narration of the lived experience of Latin-American women arrived in Quebec as asylum claimants in terms of their corporeality. Drawing from a qualitative study conducted with women from Colombia and Venezuela, I argue that mental health and wellbeing are not disembodied, but rather anchored in gender roles, practices, rituals, and norms that are embodied and culturally specific. Considering the place of the body in the experience of migration implies examining its aesthetic, sensorial, tactile, somatic and kinesthetic dimensions. This brings about new possibilities for a critical analysis of the intersections between gender, wellbeing and asylum.

#### Introduction

Forced migration has been recognized as a process involving multiple losses, challenges, and profound transformations in the person's social and personal identity (Garza-Guerrero, 1974; Silove, 2013). In terms of mental health and well-being, refugees and asylum seekers are a particularly vulnerable group among the different categories of migrants (Beiser & Hou, 2017; Bhuyan, Osborne, Cruz, & Ceris, 2013). This emotional impact has been documented mostly from a Western medical perspective that focuses on psychopathology, particularly PTSD (Ray, 2008).

Moving away from this framework, recent studies have paid attention to refugees' agency and resilience, acknowledging both the diversity of factors that shape a person's life and the need to study their influence on the migratory experience from a person-centered approach. This has propelled a research paradigm that acknowledges particular experiences of hardship, recognizes the asylum seeker's subjectivity and sense of agency over her own story and aligns mental health research and practice with a perspective of ethical care, commitment and advocacy (Rousseau & Kirmayer, 2010).

Within this paradigm, gender identity has been recognized as a central factor that impacts and shapes the person's identity and self-representation. Indeed, the intersection between gender and migration has been documented from a wide arrange of disciplines (Bravo Moreno, 2002). Nonetheless, although there is a growing visibility of women in migration scholarship, quantitative studies still tend to view "men" and "women" as discrete, comparable categories. As some authors have stated, this is an important starting point for a holistic gender analysis, but does not account for the complex interplay of power and identity dynamics (Timmerman et al., 2015). Paying attention to gender as a category that solely refers to the comparison between the biological sexes can lead to invalid and simplistic interpretations of reality and sometimes even to risky categorizations that trivialize the complexity of human identities and experiences, particularly those of women (Beyani, 1995; Freedman, 2010). Furthermore, this reifies the concept of "woman" as a stable, essential, and univocal category, erasing its cultural and subjective meanings and neglecting the experiences of non-binary people and other gender minorities.

Feminist approaches have attended to the particularities of women's experiences and highlighted the need to shift away from the existing androcentric paradigm in social and health

sciences (Benedicto, 2018). Following this framework, many works have focused on women refugees and asylum seekers, recognizing the specific challenges they face (Barsky, 2017; Crawley, 2001; Evans, Spates, Kirkland, & Kabasele, 2021). Notably, there has been a focus on women's voice and agency (El-Bialy & Mulay, 2018; Hunt, 2008) and lived experience (Evans et al., 2021; Tessitore & Margherita, 2019). But if the impact of migration on the women's wellbeing and social world has become the object of numerous studies, little attention has been given to the ways in which gender embodiment and migration intersect, and how these affect women in terms of their bodily experiences.

For Jan Jindy Pettman, a feminist analysis means teasing out connections between the category woman and actual women, attending to differences between women and seeing gender relations as power relations (Pettman, 1997). Yet feminism has been largely excluded from mainstream perspectives in refugee and migration studies (Garcia, 2018; Hyndman, 2010). Jennifer Hyndman has called attention to this divide in her essay "Feminist Geopolitics Meets Refugee Studies", in which she argues for a shift of paradigm that is grounded on refugees' everyday experiences and that understands migration from a materialist feminist perspective (2011). Feminist geopolitics, as an analytical approach, could prove useful for understanding women's mental health and wellbeing as interrelated with cultural notions of embodiment and gender identity. (Massaro & Williams, 2013).

### ***Corporeality, Gender and Migration***

In recent years, some feminist perspectives have centered corporeality as a valid paradigm, insisting on the concrete specificities of different kinds of bodies and looking to subvert disembodied notions of subjectivity that rely on the mind/body dualism (Grosz, 1994). Feminist materialist approaches critique epistemological presumptions of objectivity and

neutrality, arguing that knowledge is always produced by subjectivities that are situated in particular historical, geographical and political contexts and that are traversed by relations of power (Haraway, 1988).

Through this lens, the body is not seen as a “machine” or an object separated from affective and psychological realities, but rather as enmeshed in social, cultural and existential discourses. As Cover & Doak affirm, the body is not neutral, “but rather absolutely and dynamically tied up with cultural practices” (2015, p. 106). Feminist theorists have concerned themselves with understanding the relationship between phenomenology, corporeality and gender embodiment (García Selgas, 2014; Young, 1980), arguing that the lived experience and identities of women can be better understood by considering their embodied existence and the particularities of their being in the world.

Pierre Bourdieu’s concept of social habitus, a set of dispositions through which social relations of power are somatized and enacted by individuals, has been revisited by feminist scholars to think about issues of agency and gender (Chambers, 2005). In *The Masculine Domination*, Bourdieu talks about how these dispositions are not simply external norms, but rather inscribed in the gendered body through long and complex forms of socialization. For him, gender embodiment implies a bodily inclination to fulfill a particular identity that can be expressed by gestures that have specific social and cultural meanings: “a particular way of standing, of holding one's body, a head carriage, a posture, a gait” (Bourdieu, 2016, p. 74).

Another important contribution to the study of corporeality and gender is Judith Butler’s theory of performativity. She argues that gender is constructed through specific corporeal acts and its analysis should be grounded in subjective lived experience. In her words, gender must be understood “as the mundane ways in which bodily gestures, movements and enactments of

various kinds constitute the illusion of an abiding gendered self” (Butler, 2006b, p. 519). As gender is not a fixed and stable essence, Butler claims, it is not only expressed, but performed through stylized repetitions of acts that compose gendered subjectivities.

This corporeal feminist paradigm has been largely absent both from the field of refugee studies and that of refugee mental health research: although it has been recognized that “women’s mental health, bodies and sexualities are closely related and need to be studied together” (Yüksel, Cindoğlu, & Sezgin, 2012, p. 10), research on gender, mental health and migration trajectories often ignore the bodily aspects of migration, focusing solely on psychological and social vulnerabilities. When the female body is considered, it is seen as a site of suffering or illness or as a cause of discrimination and oppression, rather than as a political and relational object that is socially inscribed (Grosz, 1987). Thus, its symbolic meanings and their relationship to gender identity and personal wellbeing tend to be obscured. I argue that, for refugee women, the gendered body is a site of major transformations induced by the dislocation of involuntary migration and, beyond being a locus of distress, may be a site of agency and meaning-making. This text focuses on what womanhood means in terms of material and embodied experience to asylum-seeking individuals in their current resettlement context.

### ***Research Questions***

- How are the challenges and opportunities of migration experienced in and expressed through the gendered body?
- How do migrant women from Latin America speak about their experience in terms of gendered embodiment?
- What bodily practices, rituals and sensations play a role in their life as an asylum seeker?

## Methods

Issues of power and asymmetry have been documented in conventional methods of interviewing (Mackenzie, McDowell, & Pittaway, 2007). Following Ann Oakley, Jansen & Rae Davis argue that “the primary orientation of feminist researchers is toward the validation of women's subjective experiences ‘as women and as people’ (p. 30)”. (1998). Feminist listening, thus, means attending not only to words, but also to the intricacy of the larger social discourses at play in another person’s life. It also means situating the body within these discourses and reflecting about how gender, class, social status, nationality, and other markers of difference are constantly renegotiated in ways that are not disembodied and abstract, but that have very concrete consequences in its materiality and meanings.

Ethnographic interviewing methods provide insight on human experience in deep and singular ways and therefore enrich the project’s findings and discussions, aiming to emphasize the participants’ sense of autonomy and agency (Mahler & Pessar, 2006). As Timmerman et al. have stressed, this approach underscores the importance of holistic and contextual interpretations (2015, p. 15). One of the advantages of this design is that it allows for self-determination and autonomy. It aligns with the paradigm of intercultural engaged research (Corbeil & Marchand, 2006; Laaroussi, 2007).

Nine in-depth semi-structured interviews with a life course perspective were conducted in Spanish between February and October 2020. Each individual interview lasted on average 1 hour and 15 minutes. The first three were conducted in person. Due to the Covid-19 pandemic, the following six interviews were conducted through a videocall platform. All women were contacted and interviewed by the first author, a white-passing, cisgender woman from Colombia.

A modified version of Dan P. McAdams' Life Story Interview (2008, 2015) was used to guide the interviews. However, the direction of the conversation was not determined a priori by the interviewer. The interviewee was free to ask questions, make pauses, stop the interview at any point and disclose only the details that she chose. According to the framework of intersectional research, interview questions should not identify categories as separate but speak to what participants consider relevant intersections in their lives. This broad focus reflects best the complexity of everyday experience (Hunting, 2014). Questions were thus not framed around one particular axis of experience (e.g. "being a refugee" or "being a mother") but in a more general, open-ended manner, so as to allow the participant to point to what they consider relevant about their own experience and personal point of view. The theme of the gendered body emerged early on during the interviewing process, as it became a salient element in the narrative construction of the participants' self-image and identity (McCormack, 2000; Somers, 1994a). Hence, few open questions were added to inquire about this subject, such as "are there any particular bodily sensations that you associate with this experience?" and "could you tell me a bit about how your gender might have influenced your experience as an asylum seeker?".

Interviews were recorded and transcribed by the author. The transcripts were then coded and analyzed following a feminist interpretive approach, which pays attention to gender and power relations while foregrounding the meanings that participants grant to their lived experience and highlighting their voice and agency (Jansen & Rae Davis, 1998). An intersectional approach helped the researcher recognize themes and intersections between them (Hunting, 2014; Nagar & Swarr, 2010). According to this framework, interview questions should not identify categories as separate but speak to what participants consider relevant intersections

in their lives. This broad focus reflects best the complexity of everyday experience (Hunting, 2014, p. 12).

## Participants

Since the 1980's, thousands of people have emigrated from Latin American countries to Canada because of sociopolitical conflict and war. Most of the research that looks at the experience of Latin American migrant women has been conducted in the United States (Espin, 1987; Torres, 2018). Some works have tried to understand gender-based violence as a motivation to migrate (Argüelles & Rivero, 1993), with a strong focus on women from Central America (Bhuyan, Osborne, & Cruz, 2016). Yet, as sociologist Rocío García argues, the embodied experiences of migrant Latinas are still marginalized and misrepresented in academic research (Garcia, 2018).

In recent years, the trajectories of Latin-American asylum-seekers and refugees in Quebec have been documented, some with a gender-informed perspective (Arsenault, 2010; Ginieniewicz & McKenzie, 2014; Lambert, 2014). This research explores Colombian and Venezuelan women's gender embodiment, understood as their subjective conception of their own femaleness, the gender roles they play and the gendered ways in which they express their personality. Moreover, it considers how the body plays an integral part in shaping their identities and their ways of being in the world.

Nested within the Settlement study<sup>3</sup>, the current project seeks to understand, from their perspective and in their own words, how Latin-American women asylum-seekers in Quebec

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<sup>3</sup> The full title of this study is *S'installer: Comprendre les enjeux du parcours et de l'intégration des demandeurs d'asile au Québec* (Settlement: Understanding the trajectory and integration of asylum-seekers in Québec or Settlement). This investigation was conducted by a team of researchers from 6 Québec universities under the leadership of Professor Jill Hanley (School of Social Work, McGill University), with funding from the FRQSC for

perceive their social and subjective positionalities at the time of the interview. The study focuses on the timeframe of recent arrival to Quebec, recognizing that the needs, concerns, and perceptions of asylum seekers and refugees change and evolve as time passes in the host country (Beiser & Hou, 2017). This study was approved by McGill University's Ethics Institutional Review Board in October 2019. The approval was renewed in September 2020.

Nine respondents who had previously participated in the study *S'installer: Comprendre les enjeux du parcours et de l'intégration des demandeurs d'asile au Québec* (Hanley et al., 2021) were recruited. Names were changed to pseudonyms for confidentiality purposes. Two other women were contacted but refused to participate in the study. The group of participants presented the following characteristics:

- They were self-identifying cisgender women who had arrived in Quebec between 2017 and 2018.
- Four came from Colombia and five from Venezuela.
- Their ages ranged between 22 and 67.
- Except for the youngest participant, all were mothers.
- All had accessed higher education: four had completed graduate studies, four held bachelor's degrees and one had recently finished CEGEP.
- Six had entered Canada by foot through the border with the United States.

### **Author's Positionality**

Participants were very forthcoming and open about their experiences and opinions. This can be explained, in part, by my identity, as I am a white cisgender woman who grew up in

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2019-2020. It examines the experience of asylum seekers who arrived in Quebec between January 2017 and December 2018. The Settlement sample includes mostly claimants coming from Colombia, Venezuela, and México.

Bogotá, Colombia. First, this openness can be related to my gender, but also by the fact that the interviewees and myself have a shared mother tongue and cultural background. Even for Venezuelans, the fact that I was a Colombian woman created a sense of intimacy and trust: in their stories, they constantly referred to “our countries” (Carolina), assuming that we were talking about common ground. One said “you, because you are a *paisana* [a fellow countrywoman], you know what I am talking about” (Emma, seg. 9). Although I had migrated to Canada as a voluntary migrant and not as an asylum seeker, they expressed interest and curiosity about my own experience as a migrant in Montreal. One participant said: “I know that I am the interviewee, but tell me: how has it been for you to be here?” (Elisa, seg. 156); another one asked if she could share with me a private story about an illness experience that was unrelated to her migratory status (Emma, seg. 29).

Moreover, the unstructured nature of the interviews and person-centered approach of our encounters made them feel comfortable and listened to. Although they had already been interviewed about their migratory trajectories, many expressed appreciation for the occasion to tell their story, complain, laugh, and even cry in a safe space. They saw this as a cathartic opportunity to name parts of their experience that were not often listened to, especially not in their own language. One participant shared that she felt proud that a Colombian young woman like herself was doing this kind of research.

## Results

### *The Body, Examined and Revindicated: Dislocated Sensations and Cultural Ambivalence*

All participants view migration as a key experience that has profoundly reshaped their lives. Most perceive that their self-image underwent important changes as they left their home country and resettled in Quebec. Barriers to accessing jobs in their professions, lack of financial

stability, loss of social status and grief for being away from their families and friends were common complaints. Yet, each participant also highlighted many positive aspects of her life in Quebec, including an increased sense of safety and freedom, a higher quality of life and the wellbeing of their families.

Participants conveyed having experienced a sense of disorientation that had to do, first, with discovering and adjusting to a new and unfamiliar physical space and, second, with the changes in gendered social expectations and cultural norms. Now that they were inhabiting a new space, a central question seemed to be: where do I situate myself, both in spatial and social terms? Although these are not two separate themes but are rather entrenched with each other, I will first speak about the participants' accounts on their bodily sensations, and then about social meanings attributed to gender embodiment in the context of being an asylum seeker.

### ***Inhabiting the material body: micro experiences***

Several respondents speak of their corporeal experience in terms of practical and concrete adjustments to a new and unfamiliar environment. They report that, often, the biggest challenges lie in everyday, ordinary details that have a bodily dimension: keeping up with the weather forecast, deciding what to wear depending on temperature and seasonal changes, getting used to different kinds of foods, learning how to walk on ice and snow, buying the right clothes for them and their families, even learning to use Google Maps to navigate the city, for example, are material and practical concerns that take up a lot of space in their lives, as mentioned by Emma (age 67) and Ana (age 38).

**Unknown Discomforts.** Leaving one's country as an asylum seeker implies being in unfamiliar situations. Most participants describe their experience as confusing, taxing, and stressful. Illegally crossing the border, arriving to overcrowded shelters, learning a new

language, sleeping on someone's couch for months and running around the city to find appropriate housing and deal with legal concerns and immigration paperwork are experiences marked by tiredness and disquiet. Such fatigue has an impact on the body:

Those first three weeks were very, very, very exhausting. I am not someone who goes to bed early, but during those three weeks, at around 6 or 7 pm, my legs just couldn't carry me anymore. (María, age 51, seg 7)

**Arrival.** Several participants recount the hardship of their migratory trajectory and of the first few days after their arrival in terms of physical discomfort. Most respondents crossed the US-Canada border by foot, which was an experience marked by fear and uncertainty, particularly for Juliana (age 22), Ana (age 38) and Lucía (age 39). As Lucía (age 39) shares:

At the border, well, we crossed with our suitcases and without knowing really what was on the other side. At that point, you experience fear, there are many simultaneous emotions, because it means that you and your family are exposed, even your small children" (seg. 14)

Some of the discomforts that participants recall while being at the refugee shelters include sleeping on the floor, long waits in crowded rooms, being hungry and worrying for the wellbeing of their children. One participant's child got sick and required medical care (Lucía, age 39, seg. 15). Juliana describes how rough it was at the beginning: "It was really terrible. I mean, there were so many people. They practically made you sleep on a stretcher. No, it wasn't even a stretcher". (age 22, seg. 85).

For some women, especially for those who came from an upper-class background, this marked a stark contrast with the luxuries and comforts that they had in their home country. As María, a 51 years-old participant from Venezuela, states:

“I used to have certain comforts in my way of doing things. I was used to being the boss, having a secretary, having a nice office, being a leader. (...) I miss many things about my life. I mean, here I am a dispossessed person (soy una persona que no tiene nada).” (seg 56)

**Pain.** For some participants, specific kinds of physical pain were a significant part of their dislocation experience. Pain was related to changes in posture, habits, and lifestyles. For example, Patricia (age 62) recounts that, after having worked as an accountant and sitting in front of a desk for 35 years, the only work she could find with her status as an asylum seeker was in a meat packing factory. She says that, because she was not used to being on her feet for 8 hours a day, the postural change caused her severe and debilitating back pain, which had a great psychological impact for her.

María (age 51) speaks of her Achilles’ tendon hurting when she had to put on tennis shoes and toss aside her high heels to spend her days walking and rushing around an unfamiliar city, navigating bureaucracy: “I had walked so much all day, my feet really hurt. I felt exhausted, *exhausted*” (seg 7).

**Cold.** All participants mention the difficulty of getting used to the Canadian winter. Although this can seemingly appear as a banal preoccupation, it is important to remember that Colombia and Venezuela are tropical countries where temperature is mostly steady and predictable. Many coincide in how, besides experiencing a culture shock, coming to Quebec also means undergoing a climate shock (Carolina, age 46). Emma, from Venezuela, states this as the most challenging aspect of her migratory experience:

LGT: What has been the hardest part?

Emma: Winter [laughs]. Winter. To handle myself as a person in winter. It is tough when

you are not used to these *mild* temperatures [laughs]. Listen, going out was scary. I remember the first time I went outside in the snow alone. I would say to myself: how am I going to walk?” (age 67, seg. 62)

Even though she refers to this situation with humor, she also mentions that, at her age, moving around the snowy and icy city comprises not only a matter of discomfort, but potentially a loss of autonomy: she refers that the most difficult aspect of her experience has been to learn to handle herself and navigate space alone, especially when her daughter is at work (seg. 64).

Some participants discuss an affective dimension of the experience of cold. Extremely low temperatures and lack of light are seen as factors that hinder their wellbeing and render adaptation more difficult, particularly during the first months of resettlement:

It was hard. The cold was very tough. The cold, together with the sadness, is tough. And, besides, as one arrives with little money, you cannot buy the right clothes. (...) When we arrived, my husband and I had to... I'm going to laugh so I don't cry: we had to put plastic bags inside our boots because our feet would get wet. The boots would break, I don't know. Water would come through. That is what we had to do. (Carolina, age 46, seg. 67)

We arrived in the middle of the winter, so that was a bit rough. At first, there is this sense of novelty, but then it becomes a bit hard because winter is so long. In any case, the emotional state at arrival, alongside winter, affects you (Manuela, age 31, seg. 54)

Finally, one participant states that, although the winter is very different from what she and her family knew, “one learns to appreciate it, especially for the kids” (Ana, age 38).

**Inhabiting Space.** One common theme in the interviews had to do with changes in bodily comportment. Many participants mention acquiring new habits and ways of moving across space in their everyday life. Patricia (age 62) refers getting used to crossing the street only

at the designated paths, which is something she would not do in Venezuela (seg. 48). Arriving to Quebec means establishing a different relationship to public spaces, such as parks, museums, and commercial streets.

**Safety.** Migration is viewed by several subjects as a matter of personal and hence physical safety. For most, removing oneself and one's family from a context of sociopolitical violence is at the core of the decision to flee the country. Gender is seen as an important element in this feeling of unsafety, as being a woman is perceived as a risk factor. María, from Venezuela states:

among the things that have improved for me as a woman is the fact that here I feel safe.

In my country, I did not have any of that. I mean, in my country no one lives in safety, be it a man, a woman, a dog or a cat (age 51, seg. 58).

This is echoed by many interviewees, who report having suffered many direct and indirect threats and attacks (Ana, Juliana and Manuela in Colombia, Emma and Patricia in Venezuela). Patricia (age 62) recounts an incident in which she and her niece were shot at while in a car, as well as the story of two children who had been kidnapped from her grandson's school (seg. 17). Emma speaks of incarceration and torture as common institutional practices against medical professionals such as herself, claiming that she "had no option but to claim asylum for [her] physical safety" (age 67, seg. 5). Ana, from Colombia, expresses similar concerns:

As we were aware of other cases and because we lived in a zone controlled by paramilitary groups, I said [to my husband] "we have no other option but to leave", because they don't need an excuse to kill. You just become their target, and that's it.

Staying or keeping on doing what they don't want you to do is to defy them, so I just said

“we are leaving”. Once we were in the car with the children, even, when they shot at us and threatened us. (age 38, seg.14)

The omnipresence of violence in their home countries meant living in a constant state of fear for their bodily integrity. Besides the evident consequences that such stress can have on mental health and emotional wellbeing, the potentiality of physical harm results for several participants in learning to move and use their bodies in particular ways, by modifying their posture and demeanor. María (age 51) describes how, when going to school, her daughter had to lie down on the car’s floor so she would not be seen from the outside (seg. 86). Some had to move to different cities or stay at relatives’ houses to escape persecution, as was the case for Juliana (age 22) and her family, who had lived in several parts of the country before finally deciding to seek asylum elsewhere. Common practices that had become internalized norms of hypervigilance and that dictated everyday movements included not being outside at all, going to specific places only at certain times, avoiding public transit, and never looking at your phone in public:

Then came a time when you just couldn’t live anymore because of professional and legal uncertainty and personal unsafety. You couldn’t leave the house after 5 or 6 pm. (Emma, age 67, seg. 7)

Arriving to Quebec means, then, the possibility to safely occupy certain places that were perceived as inaccessible in the participants’ home countries. For some, it marks a change in terms of mobility, serenity and freedom:

For Venezuelans, it is an immense pleasure to be able to have a cellphone and to use it on the streets. Or being able to walk around at midnight. Or taking the metro to go home at 2 am. (Emma, age 67)

***Locating Oneself in Social Spaces.*** Besides modifying one's way of being in geographical space, another dimension of resettling in Quebec implies positioning oneself vis-à-vis other bodies in terms of both physical distance and social norms. For these women, migration requires adjusting and attuning to expectations about acceptable behavior. Emma (age 67), Ana (age 38) and Elisa (age 55) speak of the importance of touch and physical proximity in Latin American cultures. For them, the use of the body in social interactions is a central aspect of affective experience and emotional wellbeing. Ana speaks of the difficulty of learning how to measure the physical distance between herself and other people in a society where touch between strangers is proscribed: "you can't get too close. If you learn to say 'excusez-moi' (excuse me) and you keep the distance, they are nice to you". (seg. 33).

Elisa speaks about how, despite being aware of the changes regarding cultural norms, she managed to establish close relationships in which touch and physical proximity were allowed by others. While working as a Spanish teacher at a community center, she would verbally announce that this was her way of showing care and respect to others. By letting them know beforehand that she would come close and perhaps touch them, she made her students feel more comfortable with this way of interacting. This participant also expressed her disappointment as, because of the pandemic, she lost the possibility to hug and kiss others (age 55, seg. 85)

Finally, gender roles define the kinds of movements that are expected from the female body in particular contexts. Lifting a box, for example, "is something that only young men would do in Venezuela, but here everybody does it", as Emma expresses (age 67, seg. 50).

### ***The social body***

**Different Norms and Expectations.** Most participants constantly establish a difference between life "here" and "there", outlining how migration is perceived to be a disorienting

transition from everyday life in their home countries to a society organized around norms and expectations that are often perplexing and unfamiliar. They relate that, in Latin American societies, cultural expectations about looks according to gender, age and social class are central in shaping how one presents oneself and inhabits social spaces. Dressing up, wearing makeup and accessories seem to define a woman's use of her body in public. As María (age 51) expresses: "in Venezuela, you better produce yourself" (seg. 96).

One of the most significant changes expressed by the participants is condensed in the expression "aquí nadie te mira", which can be translated as "here, no one looks at you". This remark is echoed in practically the same words by at least four participants (Patricia, María, Carolina and Manuela). Feeling unseen may mean many different things for each woman depending on her age, social class in her home country and professional status. For some participants, this is experienced as a positive and liberating change: by taking away social pressures about how to dress and use one's body, it allows them to focus on their personal projects and goals. As Carolina (age 46) describes,

The Latino mentality is a competition: how women dress, what clothes they wear, what purses, what watch or cellphone, and so on. Here, you are free, you don't have to worry about that. I mean, I used to not care too much about that anyway but, even for those who do care, here people don't look at you: they will not judge you by how you dress. (seg. 76)

The impact that migration has on these women is experienced differently according to their age. Juliana, Manuela and Lucía, the three youngest participants, agree that, although they are aware of the importance of dressing up and moving a certain way in their cultures, migrating to Canada has involved the possibility of reimagining and reaffirming their value as women and

as members of society. Leaving behind what they perceive as constricting gendered expectations, they allow themselves to be imperfect women:

“I am a woman and I value myself as much as anyone, and I have the same benefits as anyone. [Here, I discovered] that one is also valuable and capable” (Juliana, age 22, seg. 107)

“I was always properly groomed, properly dressed, properly everything. (...) Here, I became more relaxed. I understood that these things didn't make me more: what makes me is who I am, my ideas, how I work, my merit. Over there you lose perspective with all that”. (Manuela, age 31, seg. 88)

However, this shift in norms is not a liberation for all the women and is experienced as a loss by some of them. For older participants, particularly, this change implies feeling belittled and insignificant. Juliana (age 22) recounts the difficulty that her aunt, an older woman, has faced, as coming to Quebec implies a loss of social status and relations that were marked by her fashionable attires. Similarly, as the following fragment reveals, María (age 51) experiences the cultural clash of asylum as a loss of a valued sense of self that, for her, relies heavily on a notion of embodied femininity:

The first grief was over the high heels. Now I feel like I am the shortest woman in Montreal. And, from then on, it has been a small grief over each thing. [I went] from my beautiful purses to the ugly, dirty backpack. To not having any clothes, not having any nice things, not wearing makeup, to my hair being all crazy, to not being able to get my regular manicures, to that, right? To not feeling empowered, like I used to. I used to enjoy feeling like that. (...) And here I have come to understand that it is pointless, because in the end nobody looks at you. I could very well walk out in my pajamas, and no one would

care. But I also understood, here, that I never did that for other people: I did it for myself.

(seg. 94)

Becoming part of a society where one's appearance is more often overlooked or ignored marks a fundamental chasm from Colombian and Venezuelan culture, where demeanor and public image are central tenets of femininity. Indeed, many agree that the feminine ideal in their home countries corresponds to very particular and somewhat rigid notions, defined by specific gendered expectations of how to dress and present oneself in public and in many social spaces. There, socioeconomic and professional status seem to be closely associated with looks. The Latin American feminine ideal, according to most informants, corresponds to a woman who is young, pretty, well-attired, wears her hair long and properly groomed, and changes styles depending on the occasion:

[There] people are well-groomed, they brush their hair, especially women. Here, women practically don't even trim it. You very rarely get a woman that is well-attired. We used to go to a bank on Montcalm and there was a lady at the front desk. She was very kind, very friendly, she made an effort to make sure we understood each other perfectly. But this lady, for example, in the summer, she walks around in slippers. And she is inside the bank. That, in the heads of us, Venezuelans, that simply does not fit. And even less if she is a bank employee. (Patricia, age 62, seg. 109)

Many participants refer that these social expectations about clothes and demeanor are not only present "there" but are rather internalized as part of their way of looking at the world. María (age 51) recalls having judged very harshly a teacher at her daughter's school because of the clothes he was wearing. As she becomes aware that her judgment comes from "the Venezuelan within", she mentions that, although she thinks that these are mental structures that need to be

revised, such adjustment implies an ongoing process of reflecting and assimilating to new ways of being as she continues getting used to her new context (seg. 98).

Similarly, Patricia (age 62) and Elisa (age 55) refer that they felt disconcerted by how relaxed people were about their clothes, mentioning that in Montreal people would easily go out in their pajamas, not caring much about public opinion. Elisa confesses that she herself went out like this to buy groceries (but insists that this happened only once!):

I wasn't even wearing earrings (...). I said, "oh my God". In my country, I wouldn't have done that. If I didn't go out dressed up, if I didn't wear a pair of earrings, if I didn't wear heels, I wouldn't go out. But here, those [things] I see as trivialities. I was a compulsive shopper [laughs]. Yes, I used to buy clothes and I had many things that here, with the mentality, are not a part of me anymore.

**Embodying Femininity.** Several participants refer to body parts, such as hair, nails, heels, face, wrinkles, which have a particular significance as markers of their femininity. These also acquire new social meanings in the context of migration, as do other bodily characteristics, such as height and skin color. But, as Elizabeth Grosz (1994) noted, embodied experience also incorporates objects, such as purses, shoes, clothes and makeup, as well as practices of bodily adornment. These define particular ways of being in the world, of presenting oneself to others, of moving through the city.

Elisa (age 55) shares how significant it was for her to be able to get a haircut during the pandemic: although her children said she was crazy for cutting it so short, she admits that not being able properly take care of her hair was deeply affecting her self-esteem:

My hair was a mess, it was horrible. And I said [to myself] "well, calm down, Elisa, you can't do anything". But I did try to fix it, I tried to feel good, so that I could look in the

mirror and see myself, you know, kind of pretty [laughs]. I don't think I'm going to lose that at all, no. There are times when you say "oh, well, I guess I went out like this". But, as long as I can, I will go out dressed up, to feel good with myself, not with others. It is to feel good, like I see myself in the mirror and say "you look good", I will continue to do it.  
(seg. 151)

At another moment of the interview, she mentions the importance that perfumes had as part of her life in her home country. This speaks to how presenting one's gender identity is not limited to looks (what can visually be perceived by others), but also to other senses. There can be an olfactive dimension of embodiment that corresponds to a chosen performance of one's identity:

What I haven't lost is my taste for perfumes. The *perfumes*. I'm still, well, I'm still a fan of buying perfumes. Compulsive. Of course, here I've stopped doing it because I don't have the same financial capacity. As far as I can, I try, a little bit, to buy myself a little something, you know. (seg. 147)

To name her current situation and her grief, María (age 51) uses the metaphor of a "soldado" (a male soldier) to describe her life in Montreal. This manly identity, characterized by pragmatism and unattractiveness, is portrayed as the exact opposite of her esteemed sense of femininity:

The life I had in my country was a more glamorous one. Here I'm practically, sometimes I feel like a soldier. A soldier. I put on the boots, the ugly boots, which make me feel very bad, I horribly miss my nice shoes, my high-heel shoes. (...) I left in my country a closet of four and a half doors full of clothes, of purses, and I love dressing up and feeling like I'm wearing makeup, with my hair looking good, with my nails done, with nice clothes.  
(seg. 56)

**Values About Sexuality: Bodily Modesty.** The account that Juliana (age 22) shares about her life after migration seems to be generally positive. Nonetheless, her hopeful tone does not exclude the fact that some aspects of her experience have been very difficult for her and her family. She refers to an experience that marked her in a profound way, which happened in the first days after arriving to Quebec:

[I experienced a] cultural shock [when arriving to the shelter...]. Really, the shock was just terrible. When you were going to shower, many people just did it naked and they didn't even cover themselves. Well, for us, the shock at arrival was terrible, because we had never seen anything like that, like, people showering... women would shower like that, naked, and they didn't even cover anything. It was like, wow, I mean, for me it was, like, I don't know. Truth is, the shock was very tough. (seg. 87)

For this participant, the conflict between her moral tenets and the reality she encounters is experienced as shock. Her language, through repetition and fragmentation, highlights the strong and negative impact that this moment had for her, as it represented a clash between her values, specifically about sexuality and bodily modesty, and the bewildering context of an overcrowded shelter.

Further in the interview, she reflects on the gendered dimension of this experience:

I feel that women are less used to seeing, like, maybe men are a bit more relaxed in that sense. [...] A man in that situation of everyone being naked might find it completely normal. But for me it was like, I don't know, when it comes to intimacy or to personal issues, then it would be a little easier for men. (seg. 103)

This fragment speaks to cultural expectations about appropriate bodily comportment, as well as to gendered cultural norms regarding public and domestic behavior. For this participant,

feminine nakedness belongs in the private sphere to a different extent than does a man's. Even though at another point in the conversation she discusses how coming to Canada has importantly reshaped her ideas about gender roles and moral values (seg. 107), this experience is part of her narrative as a disorienting and difficult event that challenges her notions of gendered corporeality.

## **Discussion**

Migration involves leaving behind one's cultural and social frameworks, which include adjusting to new gender roles and expectations. The participants agree that there is a big shift in terms of the social meanings around their physical appearance and bodily comportment. Their words point to the intersections between social status, cultural values about gender and sexuality, and other markers of difference such as age and social class. These axes of identity are not static: rather, they are resignified throughout the migratory trajectory and are experienced as evolving and dynamic.

The experience of asylum is also marked by particular bodily rituals, movements and sensations, which seem to occupy an important space in these women's lives. Their allusions to a corporeal dimension both as part of this key moment of their lives and in mundane, everyday experiences underlines the importance of understanding materiality as constitutive of identity (Hinton, 2014).

The interviewees report having experienced many of the challenges that have been previously documented in the literature on refugee women. Navigating bureaucracy, learning a new language, finding a job and integrating into a new social life are certainly important difficulties of the first months of resettlement (Beiser, 2009; Simich & Andermann, 2014). Yet, many of the experiences that they recount as central to their gendered experience seem to pertain

to spaces traditionally considered “private” and “feminine”, such as family life, maternity, marriage and caretaking. Focus on these aspects of migrant women’s experience has been largely absent from general scholarship, being present mostly in qualitative studies that undertake a feminist stance (Evans et al., 2021; Yakushko & Morgan-Consoli, 2014).

Indeed, a feminist analysis calls attention to the fact that even the smallest acts can bear political meanings and are worth examining: as the second-wave feminist slogan goes, “the personal is political”. Cultural embodiment, thus, is not restricted to macro levels of sociality; rather, it is experienced in all aspects of life, including micro experiences and bodily sensations.

To think about refugee women’s experience, it is important to consider that migration is a complex and ambivalent process of negotiation of multiple and fragmented identities and relations that can be both emancipatory and subjugating for women (Yakushko & Espín, 2010a). As Kalra, Kaur and Hutnyk (2005) claim, diasporic groups are subject to two sets of gender relations, that of the host country and that of their ethnic community.

### ***An Ambivalent Relationship to Normative Femininity***

In the respondents’ accounts, the body is portrayed as an integral part of self-representation that is essential for self-worth and self-esteem, as well as for positioning oneself within the larger social context that one inhabits. This is traversed by a particular understanding of femininity, which, on one hand, is defined by cultural values that state “what a woman should be like” and, on the other hand, relies on a subjective and dynamic definition of what it means to inhabit a woman’s body.

As such, one might say that the norms about feminine behavior and attire seem stricter in Colombia and Venezuela, as they function as markers of social status. Public life seems to be

dictated by elaborate standards of what a woman's body is expected to look like. As Clara Benedicto (2018) writes, these correspond to what she calls gender mandates, which are the ways in which patriarchal modes of sociality are internalized by women. This sensibility, which includes expectations about the importance of normative ways of comportment is anchored to the participants' home country as part of their "culture" and it undergoes an important shift as they resettle in a society in which value is placed in aspects of identity that are dissimilar to those they were socialized in.

Many practices traditionally conceived as feminine, such as dressing up, wearing makeup, getting manicures, and walking in a certain way, seem to be important elements in the narratives that these women have constructed about their identity. Recognizing that identity is related to body image and gendered cultural standards does not imply that the embodied experience of women asylum-seekers will be free of contradictions. Rather, it points to the fact that this ambivalence will be experienced in the flesh, as much as in other aspects of experience. Truly, as cultural and ethnic identities are related to notions of beauty (Lashley, 2021), resettlement will be impacted by one's perception of the gendered self and involve a certain dissonance regarding cultural expectations around beauty and gender.

The subjective understanding of the gendered self is altered or estranged because of the changes in social and cultural location. This change is invested both positively and negatively. On one hand, migrating to Quebec offers women asylum seekers new possibilities and opportunities. An important theme that emerged from the interviews was the participants' appreciation of the possibility to inhabit new physical spaces, which is associated with a sense of safety that is both physical and political. This freedom, nonetheless, is accompanied by a sense of loss of agency, as migration often hinders women's capacity to inhabit desired professional

and relational spaces. As Yakushko and Espín remark, “migration can be both emancipatory and subjugating for women [...]. Women’s bodies become the site for struggles concerning disorienting cultural differences.” (2010, p. 545).

### *Agency*

It is paramount to acknowledge that the participants’ trajectories and points of view are varied and complex. The gendered bodily experiences associated with their accounts of migration appear to be both invested positively and a source of distress and grief depending on many factors, including age, social class, professional status, migratory trajectories, etc. Importantly, these women have agency both in how they engage with their new material and sociopolitical realities, as well as in the ways they understand their evolving gendered identity as asylum-seeking women. On the contrary, they display a wide array of inventive and resourceful ways to create meaning as they reexamine their values, look for support and find hope and motivation to move forward. Their accounts contribute to challenging the mainstream view of women as passive subjects (de Billy Garnier & Lavallée, 2018).

Far from being predetermined by external circumstances, these women managed to make room for self-determination and meaning-making within the context of migration and resettlement (Berger & Weiss, 2006). Hence, the question of agency, which refers to the subject’s active participation in shaping her migratory experience, becomes crucial to understand the complexity of their experiences. All while recognizing the specific constraints and restrictive possibilities shape refugee women’s lives, this approach serves “to escape a victimizing view which only perpetuates their position ‘at the margins’ of society” (Timmerman et al., 2015).

In terms of their gender identity and embodiment, agency is expressed through the ways in which they choose to perform their identity. Participants are not mindlessly obeying

expectations about their looks and behaviors but are rather critically thinking about these cultural standards and making conscious decisions about their ways of being in the world. The expressions of their feminine selves can be understood as a reassertion of freedom; even as being an asylum seeker involves many challenges and losses, embodying identity is a dynamic process that is not fully constrained by the resettlement context.

The participants continuously attest their capacity to reimagine and revisit one's own internalized ideas of beauty and womanhood. All while being grounded in multiple identities in which cultural, gendered, social, educational and economic dimensions intersect, aesthetic choices correspond to reflective and deliberate ways of positioning oneself within the world.

## **Conclusion**

This paper sought to highlight the material aspects of life as an asylum seeker for migrant women coming from Latin America. Bringing to the fore a feminist materialist paradigm of corporeality, it explored the ways in which the participants express their gender identity in the context of migration and resettlement in Quebec. Following Judith Butler's notion of performativity, it proposes that "gender identity takes place through the various ways in which bodies are acted in relationship to deeply entrenched or sedimented expectations of gendered existence" (Butler, 2006b, p. 524).

Therefore, the body can be seen not only as a site of suffering, but rather as the interface between internalized images of oneself and manifestations of social status and group identity, which are perpetuated through complex embodied rituals and sensations. Aesthetic choices about how one shows up to the world, such as dressing up, incorporating particular kinds of movement, using certain accessories, or wearing make-up can be important aspects of the migratory experience. They become means of establishing a symbolic exchange with an external world in

which one's cultural codes about femininity and gendered expectations of bodily comportment are challenged and renegotiated.

### **Study limitations**

This research has a number of limitations. First, although there was an important overlap in the participants' experiences, the findings of this study cannot be considered as representative of the immense variety of Latin American cultures and identities. In terms of the features of the sample, it is important to consider that its small size and the homogeneity of the participants' characteristics are not free from potential biases as all the interviewees identified as cisgender, heterosexual woman, most had children, and the big majority came from upper social classes, had accessed higher education and had already been interviewed as part of the Settlement Study.

Second, it is important to consider how the COVID-19 pandemic influenced the research process, as it delayed and impacted the recruitment phase. The interviewees were given the option to meet in person or talk over an online platform, with the majority choosing the latter for convenience purposes. Although they stated that they felt comfortable and safe during the interviews, it is possible that this impacted the rapport between the interviewer and the interviewees.

The pandemic also had an impact both on the researcher's and on the participants' lives. On one hand, it affected their wellbeing as it created emotional stress and feelings of uncertainty about the future. The respondents, however, found ways to deal with these challenges, highlighting its positive aspects (i.e., being able to spend more time with their children or feeling thankful for being in Canada during the lockdowns). On the other hand, the pandemic also affected them in practical terms, as for some it delayed asylum bureaucratic processes and impeded them to access some spaces and resources that had been important sources of support,

such as community organizations and the Montreal Women's Center. The differentiated effects of the pandemic on refugee women's lives should be a topic of interest for future studies.

In terms of implications for research, this study suggests that a more interdisciplinary paradigm that centers marginalized voices, assesses gender dynamics in a critical way and focuses not only on macro but also on mezzo and micro levels of the refugee experience might be needed. Hence, feminist geopolitics, as an analytical approach, could prove useful for understanding women's mental health and wellbeing as interrelated with cultural notions of embodiment and gender identity. (Massaro & Williams, 2013). Listening to these dimensions might entail a more nuanced understanding of the experiences not only of women, but of any group. Taking into account the impact of migration on the physical and social body, and the distress and opening of perspectives that these transformations entail, could be beneficial in any kind of research, uncovering the nuancing of the Latinx identity (Garcia, 2018).

Finally, this project underlines the importance for policy makers, social workers, health professionals and other service providers of considering migrants' wellbeing not only as abstract and disembodied, but as a subjective and experiential process that has a material and corporeal dimension and that is influenced by embodied, cultural, social and gendered understandings of the world.

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