



“Help goes around in a circle”: Young unaccompanied refugees’ engagement in interpersonal relationships and its significance for resilience

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“Help goes around in a circle”: Young unaccompanied refugees’ engagement in interpersonal relationships and its significance for resilience

Purpose: This article addresses how young unaccompanied refugees in Norway actively engage in interpersonal relationships. It explores the significance of these relationships in doing well following adversity, according to the young people’s own perspectives.

Methodology: This study is based on a qualitative research design. Data were derived through a combination of participant observation, interviews and research workshops inspired by participatory methods. Twelve young unaccompanied refugees, aged 15–20, residing in Norway, participated.

Findings: Participants described actively searching for help and support in order to do well. In addition, they showed concern for others and often described an explicit intention of helping. They engaged in relationships of mutual support and helped others through acts of kindness or social involvement. Nevertheless, the relationships were not only a source of happiness, safety and well-being, but also of pain and worry.

Practical implications: Social workers who want to strengthen the resilience of young unaccompanied refugees should consider and build on the young people’s capacity for involvement and mutual support.

Value: This study offers a unique analysis of young unaccompanied refugees’ engagement in relationships and the significance of these relationships in doing well following adversity.

Keywords: Young unaccompanied refugees, Unaccompanied minors, Interpersonal relationships, Relational resilience, Engagement, Mutuality, Agency

Paper type: Research paper

Introduction

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3 Interpersonal relationships are fundamental to human existence and well-being. However,
4 ruptures, losses and transformations of relationships occur in war, forced migration and
5 exile. During 2015–2016, at least 300,000 children fled their homes without their parents or
6 other caregivers (United Nations International Children's Emergency Fund [UNICEF], 2017).
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8 Young unaccompanied refugees are considered particularly vulnerable because of their
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10 young age, exposure to potentially traumatic events, separation from primary caregivers and
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12 the challenges related to adjusting to a new society (Fazel *et al.*, 2012; Svendsen *et al.*,
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14 2018). Research has found that they are at increased risk of mental health problems like
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16 depression, post-traumatic stress disorder and anxiety (Fazel *et al.*, 2012). Nevertheless,
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18 researchers are showing growing interest in the coping strategies and resilience of these
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20 young people.
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24 There is a heightened recognition that young unaccompanied refugees should not be
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26 considered merely passive victims but also active survivors and that resilience alongside
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28 vulnerability is evident (Ní Raghallaigh and Gilligan, 2010). Even faced with extreme
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30 adversity, refugee children frequently exercise agency in interpreting their circumstances
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32 and in responding strategically to them (Watters, 2008). Nevertheless, most of the research
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34 on this group in Norway still primarily explores vulnerability and risk factors and often lacks
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36 the perspectives and narratives of the young people themselves (Svendsen *et al.*, 2018).
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38 There is a need for research on young unaccompanied refugees' own descriptions of their
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40 well-being and their interpretations of what is helpful (Førde, 2014). The present study tries
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42 to address this research gap by exploring the following research questions: How do young
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44 unaccompanied refugees actively engage in interpersonal relationships? What is the
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46 significance of these relationships in doing well following adversity? Adversity refers to
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48 difficult, unpleasant or potentially traumatic situations.

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50 Resilience concerns the capacity to do well in the face of adversity and consists of individual,
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52 relational and social dimensions. Without underestimating the impacts of community
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54 resources and societal contexts (Ungar, 2012), this article focuses on relational dimensions
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56 of resilience. As supported by Jordan's (1992) work, mutual empathy and involvement are
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58 seen as being at the core of relational resilience. The title of this paper, "Help goes around in
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60 a circle", reflects this mutuality. Earlier research has shown that relationships contribute
significantly to resilience in children and young people (e.g., Luthar, 2006). Relationships

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3 may be depicted in terms of care, help and support *from* adults. However, Jordan's (1992)
4 relational resilience approach urges an awareness of *mutual* involvement and empathy.
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6 Recent research supports the significance of children's contributions to relational dynamics
7 of love, care and solidarity in the everyday lives of migrant families but also points to the
8 lack of such research (McGovern and Devine, 2016). This study offers a unique analysis of
9 young unaccompanied refugees' involvement in relationships and the significance of these
10 relationships in doing well following adversity.
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17 The participants are young people who came to Norway as unaccompanied minors (i.e.,
18 under the age of 18 years, without parents or others with parental responsibility) and
19 applied for protection. The term "young people" (and not children or minors) was chosen
20 because they were between 15 and 20 years old when participating in the research.
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26 27 28 ***Young unaccompanied refugees, interpersonal relationships and resilience*** 29

30 Interpersonal relationships are central to children and young people's resilience (Hauser *et*
31 *al.*, 2006; Luthar, 2006). In a synthesis of resilience research across five decades, Luthar
32 (2006) described the importance of warm and close relationships to at least one caregiver as
33 "critical for achieving and sustaining resilient adaptation" (p. 780). While relationships can
34 be complicated, traumatic (Hauser *et al.*, 2006) or characterised by distance, conflict and/or
35 social exclusion (Wernesjö, 2015), resilient teens value relatedness, and this may predispose
36 them to using supportive connections when available (Hauser *et al.*, 2006).
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44 Studies of unaccompanied asylum-seeking and refugee children and young people have
45 addressed the impact of separation from primary caregivers, such as strained relationships,
46 sadness, longing, loneliness and a sense of being abandoned (Becker Herbst *et al.*, 2018;
47 Sotomayor-Peterson and Montiel-Carbajal, 2014). However, researchers have emphasised
48 the value of caring adults to unaccompanied refugees' well-being (Førde, 2017; Kohli, 2011;
49 Myhrer and Stenerud, 2011). Research reveals the importance of relationships with—and
50 support from—welfare workers (Kohli and Mather, 2003), therapists (Schriever, 2011),
51 teachers and school counsellors (Rana *et al.*, 2011). Researchers have also addressed the
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3 importance of caring foster parents (Rana *et al.*, 2011) and relatives (Sotomayor-Peterson
4 and Montiel-Carbajal, 2014).
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8 The literature has increasingly revealed how young unaccompanied asylum seekers and
9 refugees *actively* participate in relationships, not only with social workers, foster families
10 and other adults but also with peers, other refugees, family members back home and people
11 in their communities. Kohli (2011) described them as making investments in relationships,
12 regenerating belonging, establishing reciprocity and holding on to a broad sense of
13 solidarity. Among peers, unaccompanied minors exchange support and solidarity (Goodman,
14 2004; Rousseau *et al.*, 1998). In times of extraordinary adversity, they help each other
15 survive throughout the migration trajectory and provide emotional support and
16 encouragement (Rana *et al.*, 2011). Researchers have also revealed unaccompanied minors'
17 concern for people suffering in their country of origin (Goodman, 2004; Rana *et al.*, 2011)
18 and a strong motivation to help their family back home (Becker Herbst *et al.*, 2018; Omland
19 and Andenas, 2018).
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33 **Methodology**

34 ***Research design and tools***

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36 The aim of this study was to address young unaccompanied refugees' engagement in
37 interpersonal relationships and to explore the significance of these relationships to well-
38 being following adversity. The research design incorporated a participatory research
39 approach (Christensen and James, 2008) for locating young people as active collaborators
40 and agents (James and Prout, 1997). A variety of inquiry tools combining participant
41 observation, semi-structured interviews and workshops were used (Aase and Fossaskåret,
42 2014; Fjordside *et al.*, 2016; O'Kane, 2008). This approach is well suited to exploring the
43 experiences of the participants and to capturing the complexity of their lives and the ways in
44 which they make sense of their world (Greene & Hogan, 2005).
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58 ***Research process and participants***

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3 Twelve young unaccompanied refugees, aged 15– 20, participated. The first author engaged
4 with the young people through participant observation, conducted interviews and research
5 workshops. Participants were from Afghanistan, Somalia, Eritrea, Syria and Ethiopia. They
6 held various religious beliefs, were mostly male (two were female), and their time of
7 residency in Norway varied. All came to Norway as unaccompanied minor asylum seekers
8 and had been granted residence permits.
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15 The participants were recruited at a municipal centre for unaccompanied minor refugees
16 following several meetings with the staff, information meetings and the signing of consent
17 forms. The data production took place over 10 months. The first author engaged in
18 participant observation at the centre in order to get to know the young people in a safe and
19 informal setting, and gain insight into their everyday lives. A total of 15 semi-structured in-
20 depth interviews, including three follow-up interviews, were conducted at different stages of
21 the process. Additionally, eleven research workshops, inspired by participatory methods,
22 were conducted, including two days at a cabin. Nine of the participants took part in one or
23 more workshops.
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32 This methodology has some limitations. Interviews offer insights into participants'
33 descriptions of their practices in a given context, which might or might not reflect what they
34 actually *do*. Moreover, since the research relates to a small group living in a specific context,
35 findings cannot be generalised. Nevertheless, the first author engaged with the young
36 people over a longer period and used a combination of approaches (including conversations,
37 collage, role play and drawing) in order to get a more comprehensive impression of their
38 lived experiences. Although researchers contribute to the creation of meaning through
39 questions and research interests (Aase & Fossåskaret, 2014), the interviewer gave
40 participants opportunities to talk from their perspectives. She asked open-ended questions,
41 incorporating insights from the participant observation, and asked participants what topics
42 they considered important (Broch, 2012).
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55 ***Ethical considerations***

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58 The Regional Committees for Medical and Health Research Ethics (REK) approved the
59 research design. Many research participants think it positive that their knowledge and
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3 experiences are valued (Hummelvoll, 2010). However, research with vulnerable groups may
4 also cause harm so researchers need to take particular precautions (Liamputtong, 2007;
5 Norwegian National Research Ethics Committees, 2016). All data have been de-identified,
6 and the process has followed ethical procedures in line with the requirements of the ethical
7 committees. Moreover, ethical concerns were a central issue throughout the entire research
8 process in order to protect participants while also preserving their self-determination.
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10 Beginning with participant observation was a preventive measure to build trust with the
11 participants. Several other measures were implemented to secure self-determination, for
12 example, providing written information in different languages, holding information meetings
13 and repeatedly emphasising the voluntary nature of participation throughout the process.
14 The interviews consisted mainly of open-ended questions, and participants' experiences
15 before their arrival in Norway were approached with special care (e.g. interviews started
16 with questions about the present before the past (Broch, 2012). The project also established
17 a reference group with whom ethical issues were discussed and set forth an agreement
18 about professional follow-up with therapists, if needed. However, refugees risk being
19 reduced to "invisible, silent and powerless" (Broch, 2012) if researchers merely focus on risk
20 factors and vulnerability so exploring the young people's resilience and using participatory
21 approaches were considered useful.
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39 **Analysis**

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41 The analysis process was abductive, informed by qualitative content analysis (Graneheim *et*
42 *al.*, 2017) and by categorising and connecting analysis strategies in qualitative research
43 (Maxwell and Miller, 2008). After the first reading of the transcribed interviews, initial
44 findings were shared with participants in the research workshops. Their feedback led to
45 further collective data production and enhanced understanding. Then, interviews and field
46 notes were read several times, divided into meaning units and coded in NVivo. During the
47 process, a number of categories and themes, principally descriptive, were elaborated and
48 adjusted. Memos about particularly interesting issues were written. After this, a matrix on
49 relationships was elaborated, where meaning units were condensed and abstracted to
50 several levels of analysis (Graneheim *et al.*, 2014). While theory and research literature were
51 consulted, the focus at this stage was a close analysis of the data material, with careful
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3 attention paid to the complex and diverse meanings of relationships. In order to keep sight
4 of the larger context, connecting strategies were used (Maxwell and Miller, 2008). Then, a
5 literature review was undertaken in order to achieve a better understanding of the concept
6 of resilience and its relational dimensions in the literature on young/minor unaccompanied
7 asylum seekers and refugees. An analytical movement back and forth between the data, the
8 theoretical framework and the literature made a deeper understanding of the subject
9 possible.
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23 Findings

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26 The analysis revealed various processes in which the young unaccompanied refugees
27 engaged in interpersonal relationships and how these processes are related to resilience.
28 The findings have been grouped into five themes: i) actively seeking help; ii) companionship,
29 mutual support and sharing experiences; iii) the intention of helping others; iv) kindness and
30 social involvement; and v) coping and individual goals as a starting point.
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36 In one of the workshops, when participants were invited to reflect on their dreams for the
37 future, Afrax drew a simple sketch of a person who was apparently all alone (see Figure 1).
38 Surprisingly, the person was smiling, with a red heart and some small figures inside. Afrax
39 explained that the figures represented his family and friends. He added, "It's very important
40 that you have your family. Someone you love the most. Friends, family and relatives."
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46 Insert Figure 1 approximately here
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49 Afrax's statement highlights the importance of young unaccompanied refugees' engagement
50 in relationships, which is related to resilience. However, resilience concerns the capacity to
51 do well *in the face of adversity*. Without challenge, there is no resilience (Hauser *et al.*,
52 2006). Thus, before presenting the themes, some of the adversity that the participants have
53 faced will be briefly presented.
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3 Participants reported potentially traumatic experiences in their countries of origin, during
4 the migration trajectory and/or following arrival. Experiences with armed conflict, forcible
5 displacements, exploitation, humiliation, mistreatment, deprivation of liberty and limited
6 access to food and water as well as feelings of uncertainty and insecurity were addressed.
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8 Additionally, some witnessed the rape or death of fellow refugees.
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13 According to participants, experiences like these continued to haunt them several years after
14 their settlement in Norway. Abrihet explained that it could lead to stress and intrusive
15 memories, which affected her ability to think clearly and communicate with others. She was
16 concerned about refugee girls, including friends, who were raped when fleeing: "I haven't
17 experienced this myself, but if you see it in others, you have experienced it, right?" This
18 indicates that participants were not merely directly exposed to potentially traumatising
19 events themselves, but their lives were deeply interrelated to the lives of others, and they
20 experience others' suffering as their own.
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29 Everyone had experienced separation from and/or loss of close family members. In many
30 cases, one or both parents were dead or the whereabouts of parents and siblings were
31 uncertain. In some cases, the young people had achieved family reunification with their
32 mothers after separation. Losses and ruptures may lead to a feeling of being all alone in the
33 world. For Ramin, the separation from his mother contributed to the belief that "the only
34 person who can help is myself". Bahrawar, who did not know whether his parents were dead
35 or alive, felt that the loss was almost unbearable when he first came to Norway. While some
36 suffered because of uncertainty and death, others struggled to maintain transnational
37 relationships with family members who continued to live in conditions of war, repression or
38 extreme poverty. Jawad, whose parents were living as undocumented refugees in a troubled
39 region, defined life in terms of being with his family. Without his parents, who did not have
40 the right to apply for family reunification in Norway, he felt that he was "only surviving". In
41 other words, the ruptures, separation and/or awareness of their families' difficult situations
42 had a strong impact on participants.
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55 In relation to these experiences, participants described sleep problems, nightmares,
56 concentration problems, emotional pain, loneliness, sadness, sorrow, fear, stress and anger.
57 While some participants felt they had to solve their problems themselves, others described
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3 how they were actively seeking help. Seeking help was one of several resilience strategies
4 they mentioned, alongside engaging in relationships of mutual support, fostering
5 companionship, sharing joyful moments with friends, and intending to help their families in
6 the future. These strategies are central in this paper. The young unaccompanied refugees
7 are all unique, as are their approaches. What is striking is their engagement in different kinds
8 of relationships and the significance of these relationships in doing well, which will be
9 addressed in the following sections.
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23 ***“When I talk to my dad, I feel better”*: Actively seeking help**

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25 Participants who could, tried to maintain transnational relationships with their families
26 through telephone calls and social media. At the same time, many described building new
27 relationships with friends, social workers, foster parents and other helpers in Norway. In
28 some cases, transnational relationships offered consolation and had a positive impact in
29 terms of psychosocial support. When facing stress related to her previous experiences,
30 Abrihet would phone her father, whom she had not seen for nine years, and seek support:
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37 When I’m stressed, I call my dad and talk to him. Even if I don’t talk about why I’m
38 stressed... but when I talk to him, I feel better. I feel safe. (...) Because dad and I can
39 talk about everything, about love (...) I trust my dad, because he would never do
40 anything bad to me.
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45 While she associated her biological family with trust, safety, happiness, love and caring, her
46 foster family was associated with kindness and help, although with a certain degree of
47 mistrust on her part:
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51 When I talk to my foster family, I cannot trust them a hundred percent. (...) [My
52 foster mother] is very kind and helps me very much (...) with homework and
53 everything I need. (...) But I’m talking about emotions, right?
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57 Thus, trust and emotional connection seem to be related. Earlier, when Abrihet lived at a
58 reception centre, she felt lonely. She described social workers as not showing interest in her
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3 needs or emotional state, and added that young unaccompanied refugees “need a lot of
4 help in order to manage”. While it may take time to build trust, findings show that
5 participants, nevertheless, were actively making efforts to seek help and support from social
6 workers and other helpers. Bahrawar, who had struggled with bereavement and anger after
7 he lost contact with his parents, described the crucial support he received from a particular
8 social worker over time:
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15 If a house falls down, you need to rebuild it. So, I was rebuilt again. I used to come
16 here every day. (...) I only worked with [Marie]. (...) When I was sad, I came to [the
17 centre], and she was here. She tried to help me, talk to me. She showed me videos,
18 colouring books, in order to make me happy, to make me able to live.
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24 Similarly, Tesfaye indicated that it takes time and availability to build supportive
25 relationships. He highlighted the continuous support from a social worker who helped “from
26 the heart, not because it's a job”. To “help from the heart” seems related to compassion. He
27 valued the fact that she answered his calls, even when she was not at work.
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31 These examples highlight the importance of availability, attention, care, help, love, support,
32 consolation and encouragement from family, social workers and others—in other words,
33 having someone there to respond to the young people’s search for help.
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40 ***“I often help friends, and they help me”: Companionship, mutual support and sharing***
41 ***experiences***
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44 Young unaccompanied refugees taking part in this study valued companionship. They
45 appreciated socially pleasurable activities, sharing enjoyable moments and jokes and
46 engaging in relationships of mutual support. While the engagement did not require sharing
47 painful thoughts and feelings, some stressed the importance of talking about difficult
48 experiences with others in order to get help and recover. However, complexities and
49 dilemmas in communication were addressed as well.
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56 Participating in activities over time contributed to a sense of companionship with peers,
57 family, social workers, girl/boyfriends and others. Some mentioned “sitting together” or
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3 participating in pleasurable activities, such as exercise, playing football or going to the
4 cinema. Being together, without having to talk, was valued. Participation in formal and
5 informal social activities fostered feelings of companionship and belonging and represented
6 positive experiences in the here-and-now, as opposed to painful memories or worries about
7 the future. As Abrihet explained:
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13 In my life, friends are very important because, here in Norway, it's lonely if you live
14 alone and don't have friends. (...) You get stressed, and always think wrong, negative
15 things. (...) But if you have good friends, you can enjoy yourself, talk a bit, go to the
16 gym together, and things like that. It's nice, and you forget a little.
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22 Mirza, one of two participants in our sample who had achieved family reunification with his
23 mother after four years of separation, described the crucial importance of his mother and
24 brother's presence, even though he was struggling to help his sick mother adapt to the
25 Norwegian society:
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30 The fact that they are here means very much to me. Regardless of everything, when I
31 get home, when I see them, that in itself is a huge support to me. Seeing them and
32 talking to them means everything to me. (...) And when I go to work, I am sure that
33 they are there. That means *very* much to me. Sometimes, when I go home, I just sit
34 down and say, "I'm so happy!"
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41 Additionally, participants engaged in relationships of mutual support by offering and
42 receiving help from peers. This involved problem solving, financial support, comfort and
43 advice about emotional and other issues. Samiira noted how she and her friends helped
44 each other: "I often help friends (...) if they need help (...) and they help me if I need it."
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49 Nimoona explained how he and his flatmates supported each other with practical issues,
50 such as cleaning and cooking, particularly if one of them fell ill or was unable to do his
51 duties. He associated the relationship with gratitude, respect and attention:
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55 I'm very grateful for the people around me (...) when I need help. I respect them and
56 they respect me. (...) We listen to each other. (...) And if [my friend] is sad (...) I talk to
57 him: "What happened? What's the problem?"
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3 Nevertheless, social situations also led to negative experiences. Sometimes participants
4 found relationships challenging. Spending time with others who were experiencing
5 psychosocial pain could cause emotional strains. Mirza highlighted the complexity of
6 relationships by saying that some friends were joyful and joked, which made him feel good,
7 while others were sad and took “some of my energy”. Regardless, he tried to find a balance
8 between caring for friends who were struggling and enjoying himself with other friends.
9 Participants also expressed reluctance to speak to peers about painful issues. Some
10 explained that it was not helpful to tell friends about their painful past because they just
11 laughed it away or “bullied” each other. Others tried to protect peers from distress. Samiira
12 was cautious with how much she shared about her past because it could sadden friends:
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22 I don't like to tell them about my life because my life is very painful. (...) I don't want
23 to ruin our friendship. (...) I want to keep it inside me. (...) I don't want to give it to my
24 friends. Afterwards, they'll get sad. (...) I don't want us to think too much. When
25 we're happy, we walk around, we enjoy ourselves.
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31 Nevertheless, she recognised the value of sharing thoughts and feelings in certain
32 circumstances. In the end, expressing herself could be of vital importance:
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35 Sometimes, it's better to tell someone else, in order to breathe. To get help and
36 recover. (...) If you tell it to someone else, to friends, then you will feel better. Or to
37 someone else (...) that you can trust.
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42 This illustrates how these young people were reflecting on their own and others' well-being
43 and trying to navigate between the needs of both. However, they addressed several
44 conditions for building and maintaining relationships, and trust was one of them.
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51 ***“Why am I here? Somebody needs my help”: The intention of helping others***

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53 Participants described their intentions to help other people in various ways. Young people
54 who had contact with families left behind aspired to study, work and support their relatives
55 economically. Those who had no contact typically spoke about securing their own future and
56 helping other people in the future.
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3 Nimoona wanted to support his mother, sister and brother and said, "I don't live for myself, I
4 live for my family." A sense of reciprocity was emphasised by Mirza, who explained that his
5 family sold everything they owned in order to support his journey to Europe. Consequently,
6 it was unthinkable for him not to return their sacrifice. Similarly, Jawad felt committed to
7 helping his parents and was worried about their health problems, lack of food and the threat
8 of political violence in the region where they lived.
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15 I miss, or dream about, a better life, for example, to behave like other young people,
16 but I always have this consciousness, this question, with me: "Why am I here?
17 Somebody else needs my help, my assistance."
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22 The question "*why* am I here" seems related to having a purpose in life: Jawad had a role to
23 play in relation to his family. It was also suggestive of a sense of duty, associated with his
24 status as the oldest son. He explained that his parents helped him when he was growing up
25 and, now that they were old, he should return the help. The lives of Jawad and other
26 participants were interwoven with that of their families, and seemed to gain meaning
27 through the connection with and future support of their families.
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34 Regarding professional aspirations, participants spoke about ambitions to secure their own
35 future and a wish to do something for others. Nursing was among the dream jobs mentioned
36 by both boys and girls, associated with a wish to help others. Some envisioned the possibility
37 of returning to their homelands, be it as nurses or helping people suffering from human
38 rights violations and the lack of access to fundamental social services, such as health care
39 and education. In other words, participants seemed to transform personal experiences with
40 suffering, economic distress and injustices into an intention of making life better for others.
41 Nevertheless, findings also revealed that it could be hard to translate good intentions into
42 actions. Even if some aspirations might be more realistic than others, it seemed important
43 for the young people to give voice to such aspirations.
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55 ***"Doing something makes me feel good": Kindness and social engagement***
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3 In addition to mutual support among peers and family, participants also described how they
4 helped strangers through kind acts or social engagement. Actions of compassion and
5 solidarity were described as having a positive impact on their own well-being.
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9 Sabriye described his involvement in small acts of kindness, such as offering elderly people
10 his seat on the bus or carrying things for them. When asked about how helping others made
11 him feel, he answered:
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16 If you help someone, you feel either happy or proud, because if you have helped
17 someone who needed help, then he or she may perhaps help someone else
18 [afterwards]. (...) It goes around in a circle.
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23 In other words, he liked the idea that helping others could create a ripple effect beyond his
24 own life and beyond those with whom he was in direct contact. Mirza reflected in a similar
25 way. When fleeing to Norway, he met many kind people who helped him in different ways,
26 while he offered help to others. He argued that, if you help someone, you should not expect
27 that same person to return the favour automatically. Rather, the help would come from
28 someone else in the future. This seems to reflect a belief in reciprocity at a broader level.
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34 When Mirza first came to Norway, he tried to forget about his adverse experiences while
35 fleeing, but he realised it was impossible. Later, he began to tell his story in public
36 storytelling events organised by a solidarity organisation. Although painful, particularly in the
37 beginning, he appreciated using his own experiences to create awareness about what it
38 means to be a refugee so that “others shall not experience what I have experienced”. In this
39 way, he found meaning in what happened. Sharing his experiences implied becoming a
40 spokesperson for other refugees, with whom he identified. By telling his story publicly, Mirza
41 was transforming his pain into social engagement, and that felt good:
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51 I can only say that I’m trying my best to help. It makes me feel good that I can do
52 something. It’s a lot better than sitting at home and watching... I think about it, but
53 (...). I am trying to do something in practice.
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57 Becoming an active subject with agency and with a message to society was vital to Mirza’s
58 well-being.
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9 ***“You have to begin with yourself”: Coping and individual goals as a starting point***

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11 While helping others was a concern, participants also stressed the importance of taking care
12 of themselves. This included reflecting on their lives, coping with psychosocial problems and
13 addressing their own needs, such as their well-being and securing their future through
14 language learning, education and work.
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19 As mentioned, young unaccompanied refugees have to deal with separation, potentially
20 traumatic experiences and challenges related to integration, all of which can contribute to
21 psychosocial problems (Fazel *et al.*, 2012; Svendsen *et al.*, 2018). However, participants
22 described how they used coping mechanisms, such as involvement in sports, religious
23 practices and activities, and made efforts towards self-care, gratitude, patience, optimism,
24 hope, humour, goal setting and meaning making to deal with adversities. While school and
25 homework were highlighted in relation to their future aspirations, they could also be a
26 distraction from worries and painful memories.
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35 Nevertheless, participants mentioned a dilemma between taking care of their own needs
36 and caring for others. The awareness of his family’s fundamental needs made it difficult for
37 Jawad simply to enjoy life: “Of course, we would like to (...) be happy, to be like the young
38 people in Norway, but the situation doesn’t permit us (...)” In order to cope with his
39 sadness, he strived to focus on his schooling and to participate in “positive” teenager
40 activities, such as football and working out.
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47 While family was fundamental to Mirza, he prioritised his own well-being first:

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49 First myself, and then, my family. If I don’t exist, nobody can help my family. (...) I
50 consider that I must be okay for my family to be well. If I’m feeling bad, I cannot give
51 everything for my family to be well.
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56 Mirza recognised that he had to be alive and well in order to contribute to his family’s well-
57 being. Nevertheless, he was conscious of his family’s and his own needs and tried to find a
58 balance between the two.
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3 Similarly, Sabriye saw a dilemma between helping himself and helping others, but
4 considered himself a starting point: "If you are going through difficult times, you cannot help
5 anyone else. First, you have to begin with yourself, and then, you can help others." To "begin
6 with yourself" implies resorting to coping skills in order to handle difficulties. When
7 experiencing stress and negative thoughts, Sabriye found patience and gratitude helpful:
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13 I try to be patient, because Islam states that you should always be patient and thank
14 God. In hardships, you should always give thanks. (...) If I think negatively, I look at
15 those who are in a worse situation. I have to be grateful about what I have.
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20 Sabriye was describing a self-reflective and spiritual practice that involves a relationship with
21 God. From his perspective, patience and gratitude were a good starting point for coping with
22 challenges, working to reach his goals and talking to others. These coping mechanisms
23 represent an inward movement of self-awareness, emotion management and change of
24 perspective, which seems to be necessary before acting outwardly, in relation to other
25 people. Other participants also stressed the importance of religious practice in their lives,
26 which they associated with calmness, reduction of stress and meaning making, as well as
27 patience.
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35 'Beginning with yourself' implies securing one's own existence, moving towards one's
36 aspirations regarding studies and work, and making efforts to improve one's psychosocial
37 health. However, this self-care was not disconnected from the various relationships in which
38 participants engaged. Rather, it seemed to make them better prepared to relate to others.
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46 Discussion

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48 Young unaccompanied refugees taking part in this study described different kinds of
49 relationships that were important to doing well when faced with adversity. This included
50 reciprocal engagement in transnational and local relationships. However, they also
51 addressed difficulties, complexities and dilemmas related to relationships.
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57 When discussing the resilience of young unaccompanied refugees, it is still crucial to
58 recognise adverse circumstances. Supporting previous research (e.g., Fazel *et al.*, 2012),
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3 participants reported a range of inflicted harms, vulnerability and psychosocial difficulties, all
4 of which can be hard to overcome and cope with. Findings show that ruptures with loved
5 ones can create a feeling of being all alone in the world and that building trust may take
6 time. Even if young unaccompanied refugees are not always capable of expressing their
7 need for support, this need must be acknowledged. Problematic aspects of relationships
8 should also be recognised. Moreover, findings reveal how participants' "private" struggles
9 are deeply connected to the consequences of war, as well as to economic, health and other
10 injustices across the world. Hence, it is important to acknowledge severe structural forces,
11 which both enable and constrain their agency.
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20 Nevertheless, participants described the importance of care, support and help from adults,
21 including social workers, family and other helpers, which is in line with previous research
22 (Kohli, 2011; Luthar, 2006; Rana *et al.* 2011). Researchers have described the capacity to ask
23 for support (Jordan, 1992) and make use of caring adults (Hauser *et al.*, 2006) as an
24 expression of resilience, which can be associated with agency. Rather than seeing resilience
25 primarily as an individual's control over his or her environment, Jordan (1992) suggested a
26 model of "supported vulnerability", which highlights the value of openly sharing one's need
27 for support and acceptance. Moreover, it requires "relational confidence", that is, trusting
28 others and the relationship. This resonates with our findings.
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38 In addition to their active search for help, participants described an engagement in
39 reciprocal relationships of companionship, joyful moments and mutual support, and
40 participation in small acts of kindness and social engagement. In this context, Jordan's (1992)
41 relational resilience and her emphasis on mutual empathic involvement seem relevant.
42 Connections were expressed in everyday practices, such as participating in activities and
43 sharing joyful and sad moments.
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50 "The need to receive support which is cited in most resilience literature is thus imbalanced if
51 it overlooks the broader need for mutuality and involvement— the capacity to extend one's
52 interest beyond self," Jordan (1992, p. 5) noted. In her view, the capacity to ask for and to
53 *give* support is an essential aspect of most relationships. Having a sense that one has
54 something to contribute to others and that one is part of a meaningful relationship is
55 relevant to resilience. Hence, relational resilience goes beyond one-directional social support
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3 towards relational awareness, mutual empathy and mutual involvement (Jordan, 1992).
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5 Involvement and responsibility appeared in participants' descriptions of their concern for
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7 family members back home, of experiencing fellow refugees' suffering as their own, and of
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9 efforts to navigate between their own and others' needs.

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11 However, it is worth noting that the findings may reflect a social desirability bias, where
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13 participants over-report favourable behaviours and under-report undesirable ones (Bryman,
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15 2004). The interview setting is not a neutral setting where a person simply tells his/her story,
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17 but may also entail strategies to make a favourable presentation of oneself and others
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19 (Wernesjö, 2014). This might motivate participants to present themselves as helpful and to
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21 avoid mentioning negative dimensions of relationships such as pressure from family
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23 members and conflicts among peers.

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25 That said, participants in this study highlighted the mutual quality of relationships in their
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27 descriptions of receiving and giving support among peers and family as well as in kind acts
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29 and solidarity towards strangers. The latter is reflected in the statement "help goes around
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31 in a circle", which seems to encompass a broader sense of reciprocity. Participants expressed
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33 an aspiration to provide for their families, make a difference in their homelands or help
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35 other refugees. This cannot be reduced to a matter of duty (Omland and Andenas, 2018).
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37 Rather, it could be seen in light of Jordan's (1992) reflections on the need to contribute to
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39 others, transcending self-interest and self-concern, and being part of "something larger than
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41 the separate self". A similar understanding of resilience and selfhood is found in Goodman's
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43 (2006) study of Sudanese unaccompanied minors. She found that the "notion of selfhood in
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45 which one has responsibility for others, and even exists for the other", is related to a sense
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47 of shared experience, collective coping and survival.

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49 The concept 'belonging', described by Jordan (1992) as central to personal well-being and
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51 growth, could also be relevant here. Kohli (2011) categorised belonging as one of three
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53 foundations of a stable life for unaccompanied asylum-seeking children. He noted that many
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55 use their talents to "grow webs of belonging" and become part of networks of care and
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57 support. Earlier research on young unaccompanied refugees showed that while social
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59 exclusion, distant relationships with professionals and conflicts with peers could challenge
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3 their sense of belonging, they built some kind of belonging based on relationships and places
4 that were available (Wernesjö, 2015).

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8 The current study's findings indicate that participation in social activities fostered
9 companionship and belonging. The different relationships in which young unaccompanied
10 refugees were engaged contributed to their well-being in a number of ways. Participants
11 described emotions of wellness, joy, happiness, trust, safety, pride and love, as well as
12 feeling listened to, cared for, respected and encouraged. Nevertheless, relationships were
13 multifaceted. Participants described ambivalences and dilemmas linked to concerns and
14 responsibilities towards their families, which could lead to emotional pain and worry. A
15 perceived lack of interest in their needs and emotions from social workers and a lack of trust
16 were also addressed. Participants also highlighted the need to find a balance between their
17 own versus their families' and peers' painful experiences and psychosocial difficulties. In
18 order to prevent emotional exhaustion, they seemed cautious about how to interact and
19 with whom, and how to balance one's empathy for others with the need to take care of
20 oneself. This indicates that relationships could contribute negatively to their wellbeing. This
21 notwithstanding, participants' reflections on relationships also indicate that these were
22 meaningful in their lives.

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26 In this context, resilience should not be seen as a static personal trait but rather as a
27 dynamic process (Hauser *et al.*, 2006; Luthar, 2006). Hauser *et al.* (2006) note that
28 relationships can be complicated, inadequate or traumatic. However, when young people
29 value relatedness, this may predispose them to use supportive connections when available.
30 Related to this is the concept of agency, that is, the conviction that one can intervene
31 effectively in one's own life. Hence, active involvement in relationship building is central.
32 Moreover, participants' descriptions of dilemmas and ambivalences indicate that they had
33 an ability to reflect on their own lives, psychosocial health and relationships. Skills in
34 reflectivity together with relatedness and agency are crucial to resilience (Hauser *et al.*,
35 2006).

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38 Findings indicate that being exposed to atrocities and injustices and witnessing the suffering
39 of others can be extremely challenging. While disconnection is one way of dealing with this,
40 findings suggests that young unaccompanied refugees also seem to develop a capacity for
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3 empathy and solidarity. Participants described empathic listening and giving emotional
4 support to others, as well as the intention of helping others in the future and social
5 engagement in the present. Rather than simply adapting to the circumstances, some
6 participants seemed to go through a transformation. As Jordan (1992) noted, engaging in
7 mutually supportive and meaningful relationships allows people to transform private pain
8 and isolation into compassion and can become a powerful antidote to trauma.
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15 However, when unaccompanied minors wish to help their family, but cannot accomplish
16 this, it can contribute to passivity and depression (Myhrer and Stenerud, 2011), sadness,
17 loneliness, self-harm and loss of hope (Omland and Andenas, 2018). Regimes of care that
18 place refugee children in positions where they are unable to exercise choices and influence
19 their environment are likely to erode the potential for resilience (Watters, 2008).
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26 A one-sided focus on relational resilience has its limitations. First, several participants
27 highlighted the dimension of individual coping, securing one's own existence and health and
28 moving towards one's own aspirations before helping others. This implies that mutual
29 involvement and support are not always possible, and a balanced understanding of this
30 group's vulnerability, psychosocial needs and resilience is necessary. Second, participants
31 described socio-political factors that influenced their own and others' psychosocial health,
32 such as ongoing conflict and restrictive asylum policies. The relational resilience approach
33 overlooks broader contextual factors addressed in socio-ecological models (e.g. Ungar 2012).
34 Thus, emphasis on relational resilience could lead researchers and practitioners to ignore
35 structural injustice. A political will to protect young unaccompanied asylum-seekers and
36 refugees from further adversity is necessary.
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47 Despite limitations, a focus on relational resilience is useful because it recognises a particular
48 dimension of young unaccompanied refugees' psychosocial health that seems to have
49 received limited attention in the literature.
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58 **Conclusion and implications for practice**

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3 The findings reveal that involvement in mutually empathic and supportive relationships is
4 beneficial to young unaccompanied refugees. So, what are the implications for social work
5 practice?
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10 Research on young unaccompanied refugees has shown that the wish to help their family or
11 other people is not always encouraged by social workers and foster parents (Luster *et al.*,
12 2010; Omland and Andenas, 2018). Omland and Andenas (2018) explained the reluctance of
13 professional caregivers to support unaccompanied minors' intentions to help their families
14 through contemporary Western concepts of family relationships in which increased
15 independence from one's parents is seen as the ideal. This could also be related to
16 individualistic understandings of self and resilience. However, it is important to recognise
17 that young unaccompanied refugees are social actors and part of "something larger than the
18 separate self" (Jordan 1992). They both influence their circumstances and are influenced by
19 them and engage in different kinds of relationships significant to their well-being.
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29 Identifying significant relationships in young unaccompanied refugees' lives together with
30 them and encouraging them to continue building and maintaining relationships seem useful.
31 While young unaccompanied refugees often need help and support from professionals, they
32 also need social workers who strengthen their resilience, so attention should be paid to
33 building on their capacity for agency, involvement and mutual support. Participants showed
34 a concern for others and often an explicit intention of helping. Findings indicate that this was
35 experienced as meaningful and contributed to their resilience. It is, therefore, important to
36 recognise the capacity to give support and foster relationships based on mutual help.
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45 In conclusion, social workers should search for ways to strengthen young unaccompanied
46 refugees' relational resilience by building on their empathy, mutual involvement and wish to
47 do something for other people.
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51 Further research is needed to explore relational resilience through other methods and to
52 investigate how young unaccompanied refugees understand their psychosocial health in
53 relation to socio-ecological factors such as asylum policies and practices and ongoing
54 conflict.
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Drawing made by Afrax in workshop.

376x275mm (180 x 180 DPI)