

What is a good life? A qualitative study into the cultural conceptions of wellbeing in the Somali community.

By Hibo Adan
13114252

A dissertation submitted to the
Department of Psychology, Manchester Metropolitan University In part fulfilment
for the degree of BSc (HONS) PSYCHOLOGY

Date: 18/04/16

Student Declaration: *By submitting this document I confirm that the material contained in this assignment is all my own work; when the work of others has been adopted/paraphrased (e.g. books, articles, handouts, conference reports etc.) it has been acknowledged according to appropriate academic convention. Direct quotes from other works are clearly identified*

- *I have read and understand the University's statements concerning plagiarism*
- *I have included all aspects of the assignment*
- *If applicable I have paid the resubmission fee*
- *I am aware of the penalties for exceeding coursework limits*

Total Word Count: [6479].Excluding numerical tables, figures, references section and appendices.

ABSTRACT

The civil war represented a catalyst that thrust Somalis into a new environment. By moving to the UK, they were faced with new customs, cultural attitudes and religious practices. The Somali community were forced to use their strengths to adapt to this new scenario. Building on Harris's (2004) recommendations, this research emphasise the strengths of the Somali diasporas and explained how this has shaped wellbeing. This study intended to explore the cultural conceptions of wellbeing. Participants were gathered using snowball sampling. These participants were Somali women who were between the ages of 18-45. The present research used a qualitative research design and six semi-structured interviews were carried out. Interview data was analysed using thematic analysis. Four themes were found these included religion, dealing with emotions, gender issues in the younger generation and interdependence. In all four themes participants attempted to explain, the ever-evolving concept of what it means to be Somali and how this was revaluated following displacement. Previous research has highlighted that religion encouraged emotional wellbeing and offered direction in challenging stages of life, negotiating the way people coped (Whittaker 2005). Findings corresponded with past research as religion was an overarching theme, participants demonstrated that it was important for wellbeing and had an impact on all aspects of life. Themes and implications are discussed below.

KEY WORDS:	CULTURE	WELLBEING	SOMALI	DIASPORA	THEMATIC ANALYSIS
-------------------	----------------	------------------	---------------	-----------------	--------------------------

What is a good life? A qualitative study into the cultural conceptions of wellbeing in the Somali community.

The Somali diaspora in the UK:

Somalis were amongst the first African settlers in the UK and the largest migration of Somalis occurred post the Somali civil war in the late 1980s. (International Organisation of Migration, 2013).

A report by Harris (2004) highlighted the fact that research conducted on Somali people aimed to identify difficulties and detect solutions. She elaborated by describing previous research as seeing Somalis as victims of their environment. Suggestions that she outlined for further research included focusing on personal accounts to provide a variety of voices. As mentioned in the report, Somali strength and determination to overcome difficulties was absent in previous research. As many Somalis lived through the Somali civil war, they witnessed atrocities that could have affected their psychological wellbeing. However due to the strength of the Somali community, the impact on their wellbeing has not been recorded to be as severe as expected. This research aimed to explore the reasons behind this and place an emphasis on the strengths of the community whilst giving Somalis a voice and promoting a sense of empowerment.

What is wellbeing?

According to Nelson and Prilleltensky (2010), in relation to community psychology, wellbeing is a model scenario for the individual and the community. Components of wellbeing included personal, relational and collective needs and in the absence of any of these components, wellbeing can't be attained. In order for wellbeing to be achieved, the context should be accounted for as well as the needs of the individual to achieve the best strategy for wellbeing. This research used a community psychology framework. According to Burton et al (2007), it is a framework for understanding people who are marginalised by society to create change in their society.

Research by La Placa, Mcnaught, Knight (2013) has demonstrated that there is no simple definition to wellbeing as it is a complicated concept. The World Health Organisation (1946) attempted to describe health as more than just an absence of illness, it is a condition of overall physical, social and mental wellbeing. However this perspective was criticised by La Placa, Mcnaught, Knight (2013), they said although the definition acknowledged the links between health and wellbeing it was flawed, as it did not describe the impact of wellbeing on its own. La Placa, Mcnaught, Knight (2013) identified that the main difference between wellbeing and health was that wellbeing focused on the psychological and emotional side, whereas health is rooted in medical and positivist ideas.

According to McAlister (2005) when assessing wellbeing, many researchers used phrases such as life satisfaction, happiness and quality of life interchangeably. According to a report published by Galloway et al (2006), a link was established between quality of life and wellbeing, however wellbeing has emerged as a more in depth version of quality of life. This is significant as it helps describe an overall assessment of satisfaction.

Furthermore, investigating views in a non-western sample allowed researchers to understand wellbeing in a cultural and historical sense. This is significant as Manalom et al (2015) stated that wellbeing differed in people from different countries. This may give researchers an insight into how Somali people living in the UK are able to conceptualise goals for wellbeing. There are different influences on wellbeing and even though these could differ depending on the society investigated, some general factors have been identified. The physical and mental position of the society and influential people such as family and friends have been said to influence wellbeing.

Another factor influencing wellbeing was religion. Research by Whittaker (2005) demonstrated that in a Somali sample, religion encouraged mental wellbeing and offered support in difficult stages of life. By making reference to Tajfel and Turner's (1989) social identity theory, the present research aimed to discuss the influence of group membership on wellbeing.

The current study chose to address wellbeing from a non- traditional angle which incorporated interviews. Research conducted by Christopher (1999) supported the use of interviews. He reflected on the idea that even though certain measures of wellbeing were constructed for non-western cultures, some of these values may mirror the western view. Non-western cultures were known to place more emphasis on different aspects of wellbeing. In addition, regardless of the similarities wellbeing was only understood when other factors were considered such as values and assumptions within a larger outlook on culture, the self and what constitutes a good life. Therefore the interview method was thorough and captured the individual's views and explored the unique quality of culture.

Social constructionism: Wellbeing as a social construct:

According to Burr (2015), social constructionism urged us to question the assumptions that were made about the world. It suggested that our understandings are culturally and historically relative. This point of view was supported by research which stated that wellbeing is a construct (Department for Children, Schools and Families, 2008). The meaning of this construct was malleable and evolved over time. Therefore it was influenced by ideas that a society collectively perceives to be actions that lead to a good life. This study used the social constructionist approach to understand the way people constructed wellbeing and the factors which affected this.

Culture and wellbeing:

According to Rao and Walton (2004), a spotlight on culture was indispensable when understanding and tackling challenging questions such as what is valued in relation to wellbeing. As well as why social factors contributed to culture and allow an unbalanced access to a good life.

This study will adopt the definition by Rao and Walton (2004:4) which is:

‘Culture is about relationality the relationships among individuals within groups, among groups, and between ideas and perspectives. Culture was concerned with identity, aspiration, symbolic exchange, coordination, and structures and practices that serve relational ends, such as ethnicity, ritual, heritage, norms, meanings, and beliefs. It was not a set of primordial phenomena permanently embedded within National, religious, or other groups, but rather a set of contested attributes, constantly in flux, both

shaping and being shaped by social and economic aspects of human interaction’.

According to Rao and Walton (2004), culture was a vital factor influencing the expression of a good life and how life is valued. They explain that societies demonstrating unique cultural experiences have shown a capacity to develop despite their circumstances.

Maslow’s Hierarchy of needs and theory of need:

When we consider what it means to live a good life in different cultures theories like Maslow’s hierarchy of needs allows us to consider how needs influence this. However, Deneulin and McGregor (2010) explained that the theory of human need moved away from the basic needs such as food, water and shelter. Manolom et al (2015) studied the notion of wellbeing in the Lao people. In his study needs were split into two groups these included material and non-material resources. Material resources included things like shelter, clothes, food. And non-material items included consciousness, respect, loyalty, community and family. He explains that wellbeing of the Lao people was not dependant on resources but achievement. Doyal and Gough (1991) argued that Maslow’s hierarchical approach was false they used the example of mountain climbers in explaining the differences between people in their approach to self-actualisation.

Social identity theory and wellbeing:

According to Tajfel (1974) social identity theory stated that the social group that we belong to e.g. nationality, political, families and neighbourhoods allowed us to construct who we are. This illustrated the extent to which group membership and the individual’s views are intertwined. Haslam et al (2009) goes on to describe the fact that humans live in groups as this represented our social nature. Haslam et al (2009) made it clear that groups are a positive thing. He elaborated on this by explaining that they give us a sense of meaning. Other positives of group membership included the fact that groups helped us achieve goals that would be difficult to attain alone.

Research by Phinney et al (2001) explained that bicultural ethnic identities are related to an increased level of psychological wellbeing, however research by Whittaker (2004) on Somali women refuted these claims as findings have shown that conflicts occurred in relation to the difficulty experienced in traversing faith and identities.

Ethnic identity:

In terms of ethnic identity, research by Tajfel and Turner (1986, cited in, Phinney et al 2001) demonstrated that there were convincing links between group identification and self-concept. By maintaining a positive social identity individuals were able to experience a high self-esteem.

Clan membership:

In Somali culture clan membership was known to be influential in assisting wellbeing. Harris (2004) explained that clans influenced social, political and economic life. Clans had a duty to provide assistance to a new member of the community. They provided a network of support in the UK this took place in both community centres and groups.

In the Somali diaspora the influence of clan membership experienced change as in the UK clan had lost its relevance, a demonstration of this change was evident in Somali youth as they showed a disinterest in clan values and practices (Harris 2004). Clan elders were seen as out of touch with their reality. This research explored clan and religion in terms of the support network it provided within the Somali diaspora.

Religion and spirituality:

Samanani (2014) said the Somali diaspora adopted an Islamic identity this allowed individuals to abandon the clan based identity which was previously important in the Somali community. Religion served as a powerful in-group for those who practiced it. According to Galen (2015) religious individuals had a higher social support as a result of engagement with a group. However, this claim was counteracted by the possibility that non-religious individuals engaging in group membership also described the same positive effects.

According to Graham, and Crown (2014) religion was considered a coping mechanism. It aided a person's ability to cope with health shocks, aging and difficult circumstances. Difficult circumstances included poverty and marginalisation as a result of migration. Interviews carried out by McMichael (2002) of Somali women identified that Islam represented a lasting home that was carried with them through displacement and migration. It was an evocative framework of action that survived through adversities. It was expressed through daily actions and the way they reflected on their lives.

Research Question:

How do the constructs Somali people use to describe wellbeing affect their description of what constitutes wellbeing?

-The way in which the social support and group membership (e.g. religious, political and clan) affects wellbeing and buffering against stereotype, discrimination and marginalisation?

-How do Somali participants describe their needs and wants in relation to wellbeing from a community perspective this will be done by considering the perspectives of the theory of human need and Maslow's hierarchy theory and Sens capabilities approach?

Research objectives:

1. To investigate the impact of culture on constructions of wellbeing and how the distinct values and moral, social position affects this view?
2. To focus on how the individuals selected in this study have achieved a high sense of wellbeing through their personal accounts?
3. To understand the implications of incorporating different cultural understandings of wellbeing and how this impacts and individuals view on what is considered high psychological wellbeing.

Aims

To account for and attempt to understand the cultural conception of wellbeing in the Somali community in the UK. The present research aims to cover the concept of

wellbeing from a social psychology perspective incorporating concepts such as community and culture. It further aims to explore Christopher's (1999) view which states that research should investigate the norms and concepts of wellbeing in non-western communities and identify how this is affected by culture.

Method:

Design:

Qualitative research was appropriate for this study because this method was important in identifying an individual's understanding of wellbeing both in the present and the future (Camifield, Woodhead and Crivello 2009). They also clarified that qualitative research focused on an individual's resources and agency. They explained that the use of qualitative research improved the accuracy of data as information was more relevant to the participant (Camifield, Woodhead and Crivello 2009). It also allowed researchers to study characteristics of people that were important but weren't accounted for these included spirituality and religious practice. All interviews were approximately 30 minutes long and took place within the university premises.

Recruitment of participants:

Participants were recruited using the snowball sampling method. This method allowed the researcher to find individuals who were displaying good wellbeing habits. The researcher limited the number of participants to 6. The researcher approached members of the Somali community and asked for their help in identifying people who they considered to be a reflection of wellbeing. Once these individuals were identified, they were contacted by the researcher and sent an invitation letter (Appendix 2). Participants were between the ages of 21-45 and from a range of backgrounds.

Figure 1: Table showing the demographics of interviewees.

Gender	Age	Occupation
Female	43	Social Worker
Female	22	Masters Student
Female	21	Student
Female	24	Student
Female	45	Nursery manager
Female	35	Student

Data collection methods:

The researcher used a semi structured interview method, Adams (2010) explains that this form of interviewing was used to explore the connotations that people ascribe to a particular concept which in this case was wellbeing. According to Banister et al (2011) this method allowed the researcher to ask questions in any order, remove questions and introduce new questions depending on what was said by the interviewee. Denscombe (2010) elaborated on this by explaining that the interviewee was permitted to describe their opinions in more detail. This point was also explained by Adams (2010) who stated that new perspectives can be accessed by giving the participant a lead role in dictating the topics covered in the interview, therefore allowing the researcher to have access to their individual experiences.

Participants were identified via recommendation from other interviewees. Therefore they were contacted via email to ask if they are willing to take part. This was done prior to the interview using (Appendix 1 and 2). Participants were asked to read both the participant information sheet and invitation letter which provided them with sufficient information prior to joining the study.

Once an adequate number of participants had agreed to partake in the study the interviews were conducted. Before this, participants were given a consent form to sign (Appendix 3) this outlined their right to withdraw. During the interview an interview schedule (Appendix 5) allowed the interviewer to have a broad range of topics to cover. However this was flexible as the interviewee could interject and suggest topics that may be more relevant to them. This was due to the nature of semi structured interviews as they permitted flexibility. The interviews were expected to last thirty minutes however, were an hour long. The duration of the interview was adapted to the participants needs.

Following the conclusion of the interview, participants were asked to complete a debrief form and were thanked for taking part. They were then asked if they had any further questions and were given an opportunity to flag up any queries.

Data analysis Method:

The data analysis method used was thematic analysis. According to Braun and Clarke (2006) thematic analysis was a method that sorted and reported themes for the researcher to analyse. It was a rigorous and methodical way of finding patterns in the data. A theme was said to encapsulate an important aspect of the data and answer research questions. Braun and Clarke (2014), state that thematic analysis can be used for studies with a health focus. They explain that this was because it allowed a thorough and sophisticated analysis of data whilst also making the data understandable to the wider audience. A theme was described as observing important points of the data.

The steps involved in the analysis include six separate phases. Phase 1 included the researcher familiarising themselves with the data. This was done by reading the data repetitively. Whilst reading the researcher looked for themes in the data. During this phase data was transcribed for further analysis.

Upon completion the researcher progressed to phase 2 this included a process of generating initial codes, codes refer to the most note-worthy segments of the data. The researcher worked through all of the data and as stated in Braun and Clarke (2006) gave equal attention to the whole data set.

Phase three included analysis of codes and placing them into broader themes. Some codes can be applied to main themes or subthemes. This involved a process of looking closely at codes and organising them into themes. The objective of this step was to allow the researcher to contemplate on the relationships emerging between codes and themes. At this stage themes can be ignored and separated.

Phase 4 incorporated a process of reducing themes and tweaking them; it included two levels. Level one consisted of a through read of the information and establishing a pattern which follows a logical order. However if some themes did not fit with this pattern, it was recommended by Braun and Clarke (2006) to discard them. Once a thematic map was achieved the researcher progressed to the second level. This level

entailed a process in which, if the theme map is synonymous with the data set in explaining meanings validity of themes was established. Data was read and reread for the purpose of firstly checking if the thematic map matched with data. And following this code for anything that may have been missed, therefore after completing this phase themes and overall coherence with data set should have been achieved.

Phase 5 included specifying and labelling themes, this was when the researcher was able to pinpoint the main points of each theme and the idea that it focusses on. For each theme a story should be described. At the end of this stage themes should be clear.

Phase 6 is the final stage and included the production of the report, they explained that the write up must include an in depth analysis that transcends the mere description of the data and creates a discussion that relates to the research question.

Justification for a chosen methodology:

The researcher chose to use a qualitative research method. As Christopher (1999) stated wellbeing was a western concept, which was constructed using a moral vision which was entrenched in culture. Therefore he goes on to explain that by conducting research in indigenous and non-western populations a perspective of understanding was attained. This created some level of awareness of the customs and concepts of wellbeing. For this reason my research studied wellbeing from a non-western perspective and aimed to investigate the claims stated in Christopher (1999).

Maslow's theory (1971 cited in O'Connor et al 2007), focuses on human beings at their best. This was reflected in his description of self-actualization. Maslow's theory was applied to this research as it focused on strengths of individuals in the Somali community and their ability to attain a good life despite the obstacles. This was supported by (Seligman and Csikszentmihalyi 2000 cited in Lin 2016) they explained that the overall target of psychology was to guarantee that wellbeing is examined from a perspective of mental health instead of psychopathology.

Ethical Considerations and risk assessment:

The BPS code of conduct was used to ensure ethical guidelines were adhered to. According to the BPS (2014) risks must be accounted for, in this research risks were avoided as the researcher anonymised data and kept everything under lock and key. Also transcripts were stored under a password protected file which granted access exclusively to the researcher. The researcher did not experience major risks as participants were not deceived. Also participants did not endure risk to their psychological health as the nature of the study is to focus on positive experiences and strategies for psychological health. The study moved away from a focus on psychopathology and distress.

In terms of privacy and dignity, participant identities remained anonymous and aliases were used. Autonomy of individuals was protected as participants were given ample time to withdraw from the study. Harm was minimised as participants were protected from risks. The researcher regulated this by only mentioning wellbeing in a positive way.

Analysis/Discussion:

Following thematic analysis, several themes were discovered. The main overarching theme was religion. Other themes included dealing with emotions, interdependence and gender issues in the younger generation.

Theme 1: Religion:

Religion emerged as a central overarching theme, which featured heavily in the interviews. Consequently, it was pointed out as an influential and enriching aspect of the participant's lives. In particular, prayer gave the believer an opportunity to display gratitude and appreciation for God.

Hafsa: 'Prayer allowed me to focus my mind on god all day and on the blessings that I have in life' (**Hafsa:** L.182-183).

Khadija: When I do not pray I don't feel happy or content (**Khadija:** L.69-69)

Hana: Prayer is such an essential action (**Hana:** L: 64-65)

Rahma: 'Prayer allows you to get closer to god...enhances wellbeing...establishes...consciousness of god...makes you aware of your priorities' (**Rahma:** L.45-47).

As displayed above, participants differed in the meanings ascribed to prayer. Participant's explanations demonstrated the link between prayer and values such as gratitude, contentment, wellbeing, happiness.

Participants identified charity as a facilitator of gratefulness which created an increased awareness of the needs of others.

Hafsa identified charity as a way of demonstrating gratitude for her life

Hafsa: 'You are supposed to give to charity' and 'try your best to take care of others and appreciate your position in life' (L: 161-163)

Iman: 'If you give charity from what you have then you're a good person.' (L: 113-114)

Rahma: 'you are thinking about others...you do not take things for granted...appreciate what you have' (L: 44-46)

There is a common theme among participants as they often relate charity to humility and appreciation. Other participants also identified gratitude and generosity as essential values in Islam, this demonstrated the qualities that are valued in a person. Emmons and Crumpler (2000) explained that gratitude in Islam is essential for a good life. This was clearly demonstrated by Hafsa's statement as she says 'my view is influenced to a great extent by Islam' because 'in Islam and you must thank Allah for everything good or bad' (L: 35-36).

Participants identified religious values as a facilitator of overall wellbeing and a buffer against mental health problems. Khadija said 'if you're grateful you won't be depressed and that contributes to your health and wellbeing' (L: 8-9). Hafsa agreed with this as she said if you are 'content you don't become emotionally depressed about things' (L: 48-49), therefore for both Khadija and Hafsa gratitude was an important preventative measure against depression.

Religion was a major part of the Somali community's lives throughout displacement. This is further validated by Khadija's declaration that religion protected her from isolation; she stated 'when I came here it was all I had to cope with the challenges ahead' (L:104). Samira said 'I brought Islam with me to this country' (**Samira. L: 16**). Both women agreed that Islam enabled them to cope with their new life. This supports findings by Abdi (2007) who said Islam was the main tool for coping in Somali women.

Although religion was associated with stability, for Iman it was also a source of familiarity in a place where 'everything's different' (L: 130). Research by Abdi (2007) supported this finding, he explained that women constantly described Islam as their source of strength permitting them to continue with their lives despite the fact that they were experiencing many changes.

Hafsa pinpointed religion as the anchor, which remained and established a connection to her previous life. Hafsa said 'It's with you through...all twists and turns in life' (L: 111-112), therefore religion was an enabler of stability and continuity. Similarly past research by Tiilikainen (2003) provided evidence for this view. He explained that everyday actions, such as regular prayers and observing religious periods like Ramadan, facilitated the construction of a home in the diaspora that constructed a bond with the past, present and future.

Predictably the experience of war and becoming a diaspora made Islam a more conscious part of life (Tiilikainen 2003). As participants no longer resided in a 'majority Muslim country' where 'Islam was easier to practice' (Samira.L:22-23). This view contrasted with the way Islam was perceived prior to these experiences. Khadija's said 'before we weren't as aware of why we did things a certain way' (L:105), but 'in the UK you have to explain Islam to others'(L:106). Participants had become more consciously aware of religion, through the process of explaining Islamic practices to the non-Muslim majority in the UK. This conscious awareness resulted in a renegotiation of their religious identity in a new country. This was shown in their accounts as they displayed a renewed religious awareness. Samira said "in terms of carrying out daily duties we started to rediscover religion and re-establish our relationship with our creator' (L: 16-17). This renewed religious consciousness manifested itself in prayer as 'people who had never prayed started praying again' (**Samira: L.18-19**). As a result of being thrust into a new religious and cultural environment, they highlighted that a change in religious practice occurred as a result of being 'taken out of home' (Samira.L:22). This correlates with past research, as before migration many people took religion for granted however after migration religion acquired a new importance in people's and identities (Valentine et al 2009).

Theme 2: Dealing with emotions:

Participants identified a discrepancy between the western and Somali explanations of mental health. Hana highlighted the scale of this issue, by saying 'this is a big issue (Samira.L:70). However a solution to the problem hasn't been created because Somali people 'don't have the facilities and knowledge to take care of mental individuals' (Samira.L:71) and 'it's not something that Somalis talk about' (Hana.L:50). This explained that even though mental health issues occur prevalently, they are not discussed. This is congruent with Guerin's (2004) position, he explained that depression and stress are concepts, which are not acknowledged by Somalis. Building on past research, participants confirmed that in Somali culture there is no definition for

this concept as it is dismissed as a problem for other people. Hana drew attention to this by stating,

Hana: 'it's a western thing' (L: 50)

Similarly Samira said,

Samira: being 'stressed...isn't a major issue so people will say oh you're feeling...down...get it together' (L: 6-8)

Dismissal of mental health problems could be due to the lack of discussion concerning mental illness in the Somali community. According to participants, Somalis circulated a perception that feeling down was often linked with moral failure. Therefore this attached a stigma to those who experience these problems. Hafsa said 'people think they are not appreciative and content' (Hafsa: L.59), and ungrateful as 'the world wasn't enough for them' (Hafsa: L: 70-71). This emphasised the strong connection between gratitude and wellbeing, within the context of the Somali culture.

Most interviewees do not share this view, instead they identified education as a means of eliminating this view. Hana said 'if people had a good knowledge of wellbeing...the less secluded and trapped people would feel' (L: 76-77). This portrays education as a precursor to an acceptance of mental health problems in Somali society. Hafsa agreed with this by saying 'people should be educated about this problem and identify ways to tackle it' (L: 66-67). Samira supported this by saying, 'they should educate themselves in order to understand mental health' (L: 74). Most participants were students therefore education may have had a personal importance to them and this could have influenced their position. Hana confirmed this by saying 'education makes you able to help your community with your knowledge' (L: 75), therefore education has enabled her to be active member of the community. This highlighted the way knowledge of mental health has become a tool for community activism and agency in tackling mental health problems.

Theme 3: Interdependence:

Participants identified interdependence as a characteristic which linked the past with the present. As explained by Khadija, 'It isn't a custom that has begun nowadays it has been in the culture for a very long time' (L:34-35). As highlighted by participants the origins of this attitude was located in the nomadic way of life. In the past nomads lived in 'a changeable environment' (Hafsa.L:38) in which there was 'a collective focus' (Iman.L:49-50). Consequently a collective attitude was essential in maintaining the group wellbeing.

This way of life has translated into the Somali diaspora as a duty on all members of the community particularly when providing assistance to those experiencing displacement. This was demonstrated in Khadija's account as she said 'people who are in need are always provided for in the Somali community' (L: 22-23). Therefore, interdependence and community organisation allowed people to 'look out for each other' (Rahma: L.59) and ensured that the basic needs of each person was accommodated. Also participants identified an interdependence between people back home and the diaspora. This was highlighted by Samira who said that 'people need each other in this country. And people back home need people who are here' (Samira.L:12-13). This interconnectedness demonstrated that interdependence functioned as a support network for people irrespective of their location.

In terms of emergency assistance, participants highlighted the fact that interdependence in Somali diaspora communities has become a necessity for people experiencing displacement.

Rahma: a refugee man who ...moved to Australia and needed food and clothes ...the community would provide for him'. (L: 61-63)

As demonstrated above community organisation was essential in providing a refuge point for those in need. Also for community members it created an accountability for each other's needs. Khadija identified this emergency assistance as 'a relief mechanism' (L: 45). Iman used the example of a community response to natural disasters, she said 'recently there were droughts in Somalia...people were quick to help' (L: 13-14). According to Sheikh and Healy (2009), in the instance of disasters such as a drought. Somalis viewed this as a religious obligation to provide assistance to those in need. This illustrated a strong connection to home and sense of duty to provide assistance in emergencies.

Other participants agreed that interdependence was an attitude which was an influential aspect of traditional Somali culture. It provided a connection between the past present and future as this practice retains its relevance in the diaspora. According to Hafsa 'Somali people...living in this country...have kept up the standard of relying on each other' (L: 131-132)

Theme 4: Gender issues in the Somali community:

In terms of the visible presence of Somali youths in education, participants identified an incongruence between the genders. Samira said 'more girls are in university' (L: 112) whereas boys 'have gone to prison' (L: 110). By creating this contrast participants drew attention to the differing experiences of boys and girls. Iman agreed with this, she said 'more women are going to work and school'. She attributed this to a recent culture shift, 'nowadays the culture is changing' (L: 51-52). This shift was perceived as more accommodating of female ambition. Consequently, this established a link between change in culture and an increased number of girls in education.

Participants indicated that there was difference in educational achievement amongst Somali boys and girls. Walick and Sullivan (2015) highlighted the fact that Somali culture stresses the function of the patriarchal gender role within the household. Parents monitor girls more closely and this was cited as a reason for superior educational achievement. Participants explained that 'girls do well in school because they're at home all the time' (Samira.L:113-114) therefore their 'parents know what they are doing' (L: 96). This establishes a relationship between staying at home, increased parental supervision and superior educational achievement. Iman supports this by saying 'girls have to ask.... when they are going out, this is one reason why they do well' (L: 96-97). Alitolppa-Niitamo (2004) provides confirmation that there is a relationship between seclusion experienced by Somali girls, as a result of stricter control and protection from the negative impact of western youth culture.

Participants highlighted that traditional attitudes towards gender roles were emphasised by parents. This was demonstrated in Rahma's example, she said 'parents say that girls should be protected...preserve their reputation' (L: 23-24). In order to maintain these roles, girls were expected to demonstrate culturally and religiously appropriate conduct in public and private spheres. Also as a girl, Iman

explains that 'there are certain things you can or cannot do' (L: 98). This highlights the rules governing a female's conduct in Somali culture.

Iman, Khadija and Samira recognise the different expectations placed on a girl in the UK and Somalia.

Iman: 'In Somalia girls would stay at home. Cook, clean and look after the house' (L: 90-91).

Khadija: 'Parents push...girls to have an education as well as take care of the house, the family and be responsible'. (L: 54-55)

Samira: 'I think in the past she would have to stay at home whereas now the norm is to pursue education' (L: 63-64)

In the UK, responsibilities placed on a Somali girl expanded as they were expected to excel at school as well as domestic tasks.

Participants disagree on the different responsibilities of girls and boys. On the one hand, Samira said 'boys don't have any responsibility' (L: 113). Iman disputed this position by saying 'I don't think Somali boys have no responsibility' (L: 94). She highlighted that 'boys should just work and take care of the family by providing for them' (L: 94-95). Rahma agreed with this position as she said a Somali boy should 'go out get a job do his studies' (L: 23). This demonstrates that both genders have specific positions in Somali society.

Holding onto traditional culture manifests itself in many ways. As highlighted by participants one way of doing this is by placing a strong emphasis on a girl's domesticity. As a result, traditional attitudes were maintained in the diaspora and represented the essence of Somaliness. Participants were not in agreement with this view. For that reason they demonstrated a conflict of interest as girls actively modernised the culture. Rahma said 'I don't believe a girl should stay at home in fact neither do my family' (L: 26-27). Participants dismissed the traditional view as old-fashioned. Samira said 'I think that way of thinking is definitely outdated' (L: 64). This occurred as a result of Somali girls gaining educational ambition and struggling to be content with the traditional role, this allowed them to explore other opportunities (Scuglik and Alarcon 2005).

Limitations and Implications:

This research hopes to empower the Somali community by focusing on their strengths. However whilst carrying out the study the researcher encountered some suggestions for improvement. These included the use of a more representative sample which could be achieved by ensuring that both genders are represented. Also this study does not reflect the realities of life in the Somali diaspora outside of the UK, therefore more research is needed to confirm or disprove the findings of this study in other participants of the world. Furthermore, suggestions for additional research included incorporating community empowerment into the mental health service. And examining what causes the variations in educational achievement in Somali youths of both genders.

Reflexivity:

My position as a hybrid researcher proved to be an asset and a hindrance. It was a significant asset as it granted me the ability to approach participants and obtain a sufficient sample relatively easily. It also allowed me to build rapport and trust with participants. However as a member of the Somali diaspora people constantly reminded me to portray them positively. Placing a responsibility on me as a community member to be sensitive of their views. Another problem was that people didn't disclose information that from they considered as obvious facts that I would know.

However although I was able to speak fluently in Somali I often had to instruct participants to be more explanatory and translate words that were new to me. This made the transcription process slightly easier. I recognised early on that I would have to address older participants in Somali to demonstrate respect. I also became aware of the difficulty in translating concepts, which have multiple meanings and began to acknowledge that these words would lose the depth of meaning if translated into English. However, I overcame this by enlisting the help of participants throughout the interviews and asking older relatives.

As explained in Bannister et al (2011) the researcher should embody the role of an open-minded, understanding listener. Therefore the interviews I tried to eliminate judgement and this helped create a relaxed environment. Also to ensure a comfortable environment interviews took place on the university campus. This allowed both the researcher and interviewee feel safe.

Conducting this research allowed me to question the thoughts that I had constructed about my own culture. In terms of my own culture and the assets of the Somali community, prior to the study I assumed that participants would echo my views on the Somali community. However this view was challenged as most participants demonstrated a diverse range of views. Therefore this reinforced the perception that culture is a construct, which is moulded by each person to fit their worldview.

References:

A. De Voe, P. (2002) 'Symbolic Action: Religion's Role In the changing environment of young Somali women.' *Journal of Refugee Studies*, 15(2) pp. 234–246.

Abdi, C. M. (2007) 'Convergence of civil war and the religious right: Reimagining Somali women.' *Signs: Journal of Women in Culture and Society*. University of Chicago Press, 33(1) pp. 183–207.

Adams, E. (2010) 'The joys and challenges of semi-structured interviewing.' *Community Practitioner.*, 83(7) pp. 18–21.

Alitolppa-Niitamo, A. (2004) *The Icebreakers: Somali-Speaking youth in metropolitan Helsinki with a focus on the context of formal education*. 1st ed., Helsinki: Population Research Institute, the Family Federation of Finland.

Braun, V. and Clarke, V. (2006) 'Using thematic analysis in psychology.' *Qualitative Research in Psychology*. Informa UK, 3(2) pp. 77–101.

Braun, V. and Clarke, V. (2014) 'What can "thematic analysis" offer health and wellbeing researchers?' *International Journal of Qualitative Studies on Health and Well-Being*. Co-Action Publishing, 9(0).

Burr, V. (2015) *Social Constructionism*. United Kingdom: Routledge.

Burton.M., Boyle.S., Harris.C., Kagan.C (2007) 'Community psychology in Britain', In Reich, S., Reimer.M., Prilleltensky.I.,Montero.,M(e.d) '*International community psychology*' Springer :New York, pp. 214-233

Camfield, L., Crivello, G. and Woodhead, M. (2008) 'Wellbeing research in developing countries: Reviewing the role of qualitative methods.' *Social Indicators Research*. Springer Science + Business Media, 90(1) pp. 5–31.

Christopher, J. C. (1999) 'Situating psychological well-being: Exploring the cultural roots of its theory and research.' *Journal of Counseling & Development*. Wiley-Blackwell, 77(2) pp. 141–152.

Crouch.M, Mckenzie,H (2006) 'The logic of small samples in interview based qualitative research' *Social Sciences Information*, 45(4) pp.483-499

Code of human research ethics (2014) The British Psychological Society. [Online] [Accessed on 2nd December 2015]
http://www.bps.org.uk/system/files/Public%20files/code_of_human_research_ethics_dec_2014_inf180_web.pdf.

Deneulin, S. and McGregor, J. A. (2010) 'The capability approach and the politics of a social conception of wellbeing.' *European Journal of Social Theory*. SAGE Publications, 13(4) pp. 501–519.

Denscombe, M. (2010) *The good research guide: For small-scale social research projects*. 4th ed., Maidenhead, England: McGraw-Hill Professional Publishing.

Doyal, L. and Gough, I. (1991) *A theory of human need*. United States: Guilford Publications.

Emmons, R. A. and Crumpler, C. A. (2000) 'Gratitude as a human strength: Appraising the evidence.' *Journal of Social and Clinical Psychology*. Guilford Publications, 19(1) pp. 56–69.

Ereaut, G. and Whitting, R. (2008) *What do we mean by Wellbeing? And why might it matter?* Department for Children, Schools and Families.

Galen, L. (2015) 'Atheism, wellbeing, and the wager: Why not believing in god (with others) is good for you.' *Science, Religion and Culture*. Smith and Franklin Academic Publishing Corporation, Ltd, UK, 2(3) pp. 54–69.

Galloway, S., Bell, D., Hamilton, C. and Scullion, A. (2006) *Quality of Life and Well-being: Measuring the Benefits of Culture and Sport: Literature Review and Thinkpiece*. University Of Glasgow: Scottish Executive Social Research.

- Graham, C. and Crown, S. (2014) 'Religion and wellbeing around the world: Social purpose, social time, or social insurance?' *International Journal of Wellbeing*. *International Journal of Wellbeing*, 4(1) pp. 1–27.
- Guerin, B., Guerin, P., Diiriye, R. O. and Yates, S. (2004) 'Somali conceptions and expectations concerning mental health: some guidelines for mental health professionals.' *New Zealand Journal of Psychology*, 33(2) pp. 59–67.
- Harris, H. (2004) *The Somali Community in the UK: what we know and how we know it*. Kings College London: The Information Centre about Asylum and Refugees in the UK.
- Hassan.F, Musse.M, Jama.J, Mohamed.F (2013) *Mapping of the Somali diaspora in England and Wales* (Online). Available at:<http://unitedkingdom.iom.int/sites/default/files/doc/publications/Mapping-of-the-Somali-diaspora-in-England-and-Wales.pdf> (Accessed at: 2 December 2015)
- Haslam, S. A., Jetten, J., Postmes, T. and Haslam, C. (2009) 'Social identity, health and well-being: An emerging agenda for applied psychology.' *Applied Psychology*. Wiley-Blackwell, 58(1) pp. 1–23.
- Kagan, C., Burton, M. and Duckett, P. (2011) *Critical community psychology: Critical action and social change*. United Kingdom: John Wiley & Sons.
- La Placa, V., McNaught, A. and Knight, A. (2013) 'Discourse on wellbeing in research and practice.' *International Journal of Wellbeing*. *International Journal of Wellbeing*, 3(1) pp. 116–125.
- Lin, C.-C. (2016) 'The roles of social support and coping style in the relationship between gratitude and well-being.' *Personality and Individual Differences*. Elsevier BV, 89, January, pp. 13–18.
- Manolom, T., Promphakping, B. and Mee-Udon, F. (2014) 'The local conception of wellbeing in Lao social cultural construction.' *Asian Social Science*. Canadian Center of Science and Education, 11(3).
- McMichael, C. (2002) 'Everywhere Is Allah's Place: Islam and the Everyday Life of Somali Women in Melbourne,' *Journal of Refugee Studies*, 15(2) pp. 171–188.
- Mcallister, F. (2005) *Wellbeing Concepts and Challenges*. Sustainable Development Research Network.
- Nelson, G. and Prilleltensky, I. (eds) (2010) *Community psychology: In pursuit of liberation and well-being*. 2nd ed., Basingstoke, UK: Palgrave Macmillan.
- O'Connor, D. and Yballe, L. (2007) 'Maslow revisited: Constructing a road map of human nature.' *Journal of Management Education*. SAGE Publications, 31(6) pp. 738–756.
- Phinney, J. S., Horenczyk, G., Liebkind, K. and Vedder, P. (2001) 'Ethnic identity, immigration, and well-being: An Interactional perspective.' *Journal of Social Issues*. Wiley-Blackwell, 57(3) pp. 493–510.

- Samanani, F. (2014) *'Belonging on the Move The question of clan amongst Somali migrants'*. Oxford: The university of Oxford.
- Scuglik, D. L. and Alarcon, R. D. (2005) 'Growing up whole.' *Psychiatry: Edgmont*. Matrix Medical Communications, 2(8) pp. 20–31.
- Sen, A. K. (1999) *Development as freedom*. Oxford: Oxford University Press.
- Shiekh, H. and Healy, S. (2009) *Somalia's Missing Million: The Somali Diaspora And Its Role In Development*. Somalia: UNDP.
- 'Somali culture' (2007) Incoherent Thoughts. Incoherent Thoughts... 20th November. [Online] [Accessed on 2nd December 2015] <https://shafisaid.wordpress.com/2007/11/20/somali-culture/>.
- Tiilikainen, M. (2003) 'Somali women and daily Islam in the Diaspora.' *Social Compass*. SAGE, 50(1) pp. 59–69.
- Tajfel, H. (1974) 'Social identity and intergroup behaviour.' *Social Science Information*. SAGE Publications, 13(2) pp. 65–93.
- The logic of small samples in interview-based qualitative research* (2006). SAGE. [Online] [Accessed on 2nd December 2015] <http://m.ssi.sagepub.com/content/45/4/483.short?rss=1&ssource=mfr>.
- Valentine, G., Sporton, D. and Nielsen, K. B. (2009) 'Identities and belonging: A study of Somali refugee and asylum seekers living in the UK and Denmark.' *Environ Plan D*. SAGE, 27(2) pp. 234–250.
- WHO (2010) *Health*. World Health Organization. World Health Organization. [Online] [Accessed on 30th November 2015] <http://www.who.int/trade/glossary/story046/en/>.
- Walick, C. M. and Sullivan, A. L. (2015) 'Educating Somali immigrant and refugee students: A review of cultural-historical issues and related Psychoeducational supports.' *Journal of Applied School Psychology*. Informa UK, 31(4) pp. 347–368.
- Walton, M. and Rao, V. (eds) (2004) *Culture and public action: A cross-disciplinary dialogue on development policy*. 1st ed., United States: Stanford University Press.
- Whittaker, S. (2005) 'An exploration of psychological well-being with Young Somali refugee and asylum-seeker women.' *Clinical Child Psychology and Psychiatry*. SAGE Publications, 10(2) pp. 177–196.
- (n.d.).

