Home away from home –
The role of design methods in processing trauma
of forced migration and loss of place

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Introduction

If design has such an interdisciplinary and diverse methodology, why couldn't we use it also to support the complex challenge of recovery from trauma? While there are several studies about the positive effects of occupational therapy (OT) (Reed and Sanderson 1999, Kashner et al. 2002, Resnick and Rosenheck 2008, Creek 2010, Desiron et al. 2011) and art therapy (Reynolds et al. 2000, Slayton et al. 2010, Haeyen et al. 2020), the potentials of design in therapeutic work is still only at the beginning of its discussion (Illarregi et al. 2022, and Meinel 2014).

Since January 2013, the author has been working with young refugees and asylum seekers as a volunteer of a Hungarian association called Útilapu Hálózat, where she founded the Open Doors working group with her graphic designer partner, Ágnes Jekli. Open Doors was created with the aim of using the methodology of participatory design to improve the integration opportunities of young refugees and to support intercultural dialogue.

The research is going to introduce the connecting point between the process of recovery from trauma and the process of design in order to prove that design has a relevance in trauma therapy. It aims to find connections between migration studies (1), trauma studies (2) environmental psychology (3) and design methods (4) in order to develop the base methodology of "design therapy" and by that a new approach to support processing the trauma caused by forced migration.

Method

The research process relies on three methods. The first is a review of the relevant literature in order to create the context: the psychology of migration and the nature of trauma, material culture and cultural anthropology, symbolism, psychology and, within that, environmental psychology. The second is in-depth interviews with young adult forced migrants, which had 4 focus: the objects and material culture (1), the topic of the place called home (2), the public places for encounters (3) and the wider geographic places like the city of Budapest and Hungary (4). The third is the author's 10-year fieldwork experience, including creative workshops and projects with refugees, as well as consultations with professionals working with refugees.

The in-depth interviews respecting 5 main conditions to filter the population. The first condition was that all the interviewees have to consider themself as forced migrants: their migration happened by push factors and their life was in danger. The second condition was that the interviewees had to be between the ages of 18 and 40. The third condition was for all the interviewees to be born outside Europe: all the members of the population experienced extreme culture change. The fourth was that all the interviewees already lived in Europe for at least two years, including at least one year in Budapest: it means that all they already have a general experience about Europe and Budapest by everyday life. The fifth condition was that they already have a residence permit and/or recognized refugee status: their protection is legally guaranteed. During the interviews, an interactive model was followed (Creswell and Creswell 2018). By the interactive method the goal was to overcome language barriers and to avoid confusion by one-sided conversations. The challenges of language barriers were supported by visual games and tasks (pictures, maps, drawings). By dialogue and visual games, an informal and deep conversation could develop.

The research also relies on the author's 10 years of field experiences, which she gained in the home of unaccompanied minor refugees in the Childcare Center of Fót, in other adult detention centres in Hungary, as well as international study visits in Switzerland, Belgium and Palestine. She facilitated short (half to 1 day) creative workshops, and long (1 week to 3 months) design themed projects. The short workshops include such as textile silk printing, bookbinding, furniture renovation, and mural painting. During the long-term projects, several indoor and outdoor public spaces were designed and renovated, also media (photo, video) training and placemaking design camp. Regardless of whether we are talking about short workshops or long projects, the goal is always to involve young people in the designing and implementation process so that they can make their own decisions, acquire new competencies, develop their creative problem-solving skills and also develop community. The experiences gained in the field are complemented by ongoing consultations and discussions with professionals working with refugees (psychologists, teachers, social workers, project coordinators). The experience and results of the 10 years were documented in the form of photos, videos and diary entries. (Sztompka 2009)

The psychology of migration and the trauma of loss of place

Forced migration is a traumatising event. (Silove et al. 1997) The traumatic reaction occurs when the self-defence system is overloaded and stops functioning: the individual can neither fight nor escape (Herman 2015). The traumatic events of forced migration are the push factors (war, persecution, disaster), the experience of multiple losses (of loved ones, home, possessions and existence) and the change of one's culture in the new environment (Hautzinger et al. 2014).

Migration generates cultural changes for both the migrant and the host country. (Horvát-Milititenyi 2011) Upon arrival in a new society, the migrant loses the gestures and codes that help our problem-solving ability in social contacts. (Croatian Militancy 2011) As a result of torture, the victim's personality is damaged, and an emotional vulnerability develops: a large proportion of victims show signs of post-traumatic stress syndrome (PTSD). (Silove et al. 1997) Traumatic events create profound changes in physiological arousal, emotions, thinking and memory, and they can even disconnect these normally integrated functions. People who have experienced trauma feel and act as if they are detached from the present: their perception becomes inaccurate, their present is dominated by intense fear, helplessness and loss of control.

Restoring control of the traumatised person is now a primary goal. (Kardiner, Symonds, Strak, Flitcraft) The recovery process consists of 3 stages, but it does not have a linear line. The first stage is to ensure the safety of the survivor. In the second the survivor recalls and tells the memory of his trauma and mourns the losses: by this the memory can be integrated into the person's life. In the third stage the survivor must create their own future, form a new self, establish new relationships, and find new faith. (Hermann 2015)

People form emotional bonds with the environment they live in and use (place attachment), and these meaningful places develop over time into a part of the person's self-definition (place identity). (Dúll 2009) There is a consensus that place attachment develops because the place enables "the expression of action control, creativity and competence". (Dúll 2009, 133) Acquaintance and activity with a place create place attachment, social actors, possession, sense of security and self-determination play an important role as well. (Dúll 2009, 239) "The forced abandonment of an important place breaks one's sense of continuity, thereby separating the two close components of identity: spatial and group identity." (Fried 1963, cited by Dúll 2009, 122)

Design therapy - the structured development of place attachment

This research explores the connection between the loss of space and design. While the response to trauma is to restore the individual's independence (1) and control (2), in the case of loss of place, meaningful places must be found (3) and place attachment must be developed (4): we must find connection to these needs in case we want to use design for recovery. This research considered design as the process of planning.

Design Thinking (DT) constantly and methodically keeping the users' points of view in the centre (Human Centred Design). The strength of the non-linear process is that it is possible to return to earlier stages and develop the project with new experiences. It does not use general problem-solving schemes, but starts from the currently established context based on cognition. It can be used in cases where there is no previous knowledge. (Brown 2009) Design and creativity are inseparable. (Taura and Nagai 2011) Given that design is nothing more than a process of creative problem solving (Brown 2009), we can acquire a well-structured coping pattern through it.

Based on both the above and the author's observations, victims must become part of the design process in order to gain access to all its benefits. Participatory design turns the usual roles upside down and expects the user to create the context, find connections, make decisions and test the final result. In this case, the designer takes on the role of facilitator to support the participants in navigating their own path and solving their own challenges. (Armstrong and Stojmirovic 2011) The author of this article has been using participatory design for 10 years with young refugees. According to the professionals working with them, thanks to the design sessions, the refugees started to work in a community, they started to personalise their rooms independently, and participation in the programs was a motivation for them. Many refugees remember these projects years later as supportive activities that helped them focus on the present moment against the past and which broke their isolation.

According to these results, design process can be relevant for therapy work in five ways. Trauma deprives the victim of a sense of power and control, while design encourages participants to take initiative, carry out plans and make decisions on their own. (1) Flashbacks of traumatic memories keep the victim in the past, while working on design process makes participants focus on the present. (2) Trauma creates helplessness, design process calls for action. (3) Traumatic events question the most basic human relationships, design process develops collaborative skills in the frames os teamwork. (4) Trauma paralyses, while design process results in concrete actions. (5) Design processes play a role in all three stages recovery. The safe environment must be created with the active participation of the victim. In the second, non-verbal tools of design can help restore memory, while the mourning process can be improved by the development of self-expression. In the third, creative problem solving can positively influence all areas of life, be it the continuation of studies, employment or connection to mainstream society. In the case of people traumatised by loss of place, it is recommended to include the aspect of place attachment and place identity in the therapeutic process. (Dúll 2009) We have previously clarified the conditions necessary for the development of place attachment and several are guaranteed during the design process: we can talk about action control (as a result of decision-making), creativity (brought to life in the entire process), ownership (by the product of the process), and the experiences and memories (experienced during the whole process).

Next steps

The intent of this practice based PHD research is to explore the connections between migration studies (1), trauma studies (2) environmental psychology (3) and design methods (4) in order to develop the base methodology of "design therapy" and by that a new approach to support processing the trauma caused by forced migration. Based on the results so far, it is relevant to investigate the therapeutic possibilities of design. More examination is needed about conditions of place attachment that cannot be clearly developed by any design process,

like: local knowledge, activity with the place, the community, the process of adaptation, security and personalization. Furthermore, it is advisable to examine the different scales of place attachment (geographic spaces, public spaces, private spaces, objects) in order to clarify the design processes aiming them. The author is working on a design therapy toolkit. Her goal is to collect those active tools (workshops, training) that can be associated with the design process to serve the therapeutic process of forced migrants and other populations who experienced the loss of place and home (children in state care, homeless people, prisoners ect.). The target group of the results will be professionals (social workers, therapists, educators, youth workers, NGOs) working with people who experienced the loss of place and home.

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