Inclusive Education for Refugee and Asylum Seeking Children

A Systematic Literature Review

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One year master thesis 15 credits
Interventions in Childhood

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Spring Semester 2016
ABSTRACT

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Inclusive education for refugee and asylum seeking children
Offered supports to remove the barriers towards learning

BACKGROUND In recent years, there has been an increase in the number of children with a refugee background in the Netherlands. All of these children who are under 18 years of age must go to school, but they face many barriers towards inclusion. Appropriately educating this diverse group of children presents schools with challenges. Supportive programs are needed to overcome these barriers and challenges.

AIM The aim of this paper was to explore what supports are put in place to foster refugee students’ inclusion in school.

METHOD A systematic literature review was conducted to synthesize research on school-based programs and practices.

RESULTS A broad range of supports were identified. Most studies addressed access barriers to learning by offering emotional and educational support, while fewer studies focused on opportunity barriers such as negative attitudes and lack of parental involvement.

CONCLUSION It was concluded that schools can play an important role in supporting the inclusion of refugee children and their families because of their accessibility, but that more high quality research is necessary in order to assess the effectiveness of supports that minimize barriers towards learning and promote their inclusion in school.

Keywords: Refugees, asylum seeking children, inclusion, education, schools, barriers, support
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Introduction

Education for refugee children in the Netherlands

There has been an influx of refugee children from the Middle East to the Netherlands, that is an increase of 217% since 2012. According to data from COA (from 22-02-2016) there are approximately 11,719 children below the age of 17 in asylum seeker centres in the Netherlands (Centraal Orgaan opvang Asielzoekers, 2016). Approximately 45% of these refugees are from Syria, 9% from Iraq, 8% from Eritrea, 7% from Afghanistan, 7% Ethiopia, and 25% from other countries. When refugee children enter the Netherlands, they have to go to school within 72 hours after arrival (College voor de Rechten van de Mens, 2015; Rijksoverheid, 1969). There are four types of schools that take in refugee children: schools that are connected to asylum seeker centers (AZC schools), special schools that only teach newcomers, primary schools with separate newcomer classes, and regular primary schools with a small number of refugee children (CED, n.d.). In the last type of school, newcomers often receive support in the class or get Dutch lessons outside the classroom, either in a group or individually. Most of the newly arrived children are being taught in AZC schools connected to the centres, where they start in language classes with specially trained teachers. In AZC schools the main focus is on learning the Dutch language and getting familiar with the new culture, but also other subjects are included in the curriculum such as counting and writing. It should be noted that because these children are often still in an insecure, vulnerable position, extra activities such as assertiveness trainings are also offered, which is made possible by grants from the European Refugee Fund (Centraal Orgaan opvang Asielzoekers, 2016). Although the situation is certainly not ideal, children at least have a safe place to live, learn and play. Bigger problems arise when families find a residence, because then these children have to register at a different regular school in the neighbourhood. However, most Dutch schools are not prepared for these newcomers (Van Baars, 2015). Although Dutch schools have become pretty familiar with immigrant children, refugee children constitute a different subgroup. According to the refugee convention a refugee is:

“A person who owing to a well-founded fear of being persecuted for reasons of race, religion, nationality, membership of a particular social group or political opinion, is outside the country of his nationality and is unable or, owing to such fear, is unwilling to avail himself of the protection of that country; or who, not having a nationality and being outside the country of his former habitual residence as a result of such events, is
unable or, owing to such fear, is unwilling to return to it.” (UN General Assembly, 1951, p. 14)

The expression, ‘migrants travel somewhere, refugees from somewhere’, illustrates the difference in definition between migrants and refugees. Immigrants choose to reside in a different country on a voluntary basis, and have had time to think about their choice (Cowart & Cowart, 1993, 2002 as cited by McBrien, 2005). They often arrive after years of preparation, such as locating housing, securing jobs, and already have become somewhat familiar with the language of the host country (Strekalova & Hoot, 2008). Refugees on the other hand were forced to leave their country because of violent circumstances and poor living conditions. Moreover, post-migration experiences, meaning their resettlement in the Netherlands, can be a negative experience. Many refugees are poor and have few possessions, and have to deal with long insecure procedures in asylum seeker centres. Besides this, almost every step in the procedure requires them to move to a different centre, with the consequence being that families often have to move multiple times a year (Donkers, Kloosterboer, Kooistra, van Os, & Smets, 2013). With each move, the children have to go to a different school and leave their newly made friends again. Also for the teachers and school leaders this presents challenges.

“I also have to think about my own people. If you constantly take in children who leave again after two weeks, this is impossible to handle. We have a special starting program, which entails a lot of administration. If they then leave again after two weeks, there is not a single effect of the things that you do. The children are indeed happy to go to school, but it is not meaningful. And very stressful for the teachers. And extremely uneasy for the children themselves.” Blumers, H. Principal of OBS De Barthe (Eggink, 2015, p. 6).

This statement shows that refugee children are mainly seen as a ‘problem’ rather than as a positive contribution to the classroom. Other practical challenges that schools face, is a lack of information about the newly arrived children and their background, and that teachers don’t know how to differentiate teaching or how to manage the classroom if there are such big differences in language and academic level (Algemene Vereniging Schoolleiders, 2015; Eggink, 2015; Schoolleidersregister PO, 2016; Van Baars, 2015). Besides this, schools can apply for extra budget only when they take in more than 10 asylum seeking children (Dekker, 2015). This often results in a lack of funding and makes it difficult for schools to offer additional support to their students.
According to the Convention on the Rights of the Child (United Nations, 1989), refugee children have the right to special protection and help (article 22) and - just like all Dutch children - have the right to free education (article 28) that is directed to the development of the child’s fullest potential with respect to his or her cultural identity, language and values (article 29). However, the statements of teachers, school leaders, and lack of funding, suggest that currently these basic children’s rights are not being met. It is apparent that Dutch schools face many challenges with the influx of refugee children, which increases the risk of this already vulnerable group of not being able to participate in the education curriculum. Therefore, this literature review focuses on supports for refugee children in regular schools, to foster their inclusion and ensure that their rights are being met.

**Background**

**Integration and inclusion**

Shaping differentiated education starts with a vision on dealing with differences. When the first special education schools in the Netherlands were established, the medical model of disability was most prevalent. The underlying idea was that children who were severely impaired in their development, needed specific schooling in separate classes and schools. This was to unburden the teacher and to make sure the children would receive the special support they needed that could only be offered by experts. However, soon after the establishment of the first special education schools it became clear that there were also drawbacks to these separate services. It was argued that these special facilities were too expensive, that they could hinder participation of children with special needs in everyday life, and that it could lead to stigmatization of minority groups. Striving towards inclusion became a trend in many countries, which stands in contrast to the approach whereby children with learning disabilities or other disorders are placed in special education schools or classes (Smeets, 2007).

Integration and inclusion are two different concepts that have been used to describe the position of children with special learning needs in regular schools. Integration refers to a process whereby children with special learning needs are being placed in regular schools, without accompanying changes in the organization of the school, its curriculum and teaching strategies (Harman, 2009). Inclusion on the other hand, refers to a process in which the school is organised to accept and accommodate for differences in children as an evident fundamental condition (UNESCO, 2005). In the Netherlands, the process of striving towards inclusion started in 1990 with the introduction of Weer Samen Naar School (back to school together), with its’ main goal to ‘bring special services to the student, instead of bringing the student to
special services’ (OC&W, 1996a, p. 9, as described in Schuman, 2007). Although integration of some groups of students, such as students with visual impairments, was reasonably successful, the integration of other marginalized groups declined (Schuman, 2007). In 2005, a new policy initiative called ‘Passend Onderwijs’ was introduced, in order to reduce the number of referrals to special education and to stimulate inclusive teaching. New laws were introduced that were supposed to push towards inclusion (Pijl, 2015), but unfortunately neither of these policy initiatives have been very successful. As argued by Schuman (2007): as long as professionals do not shift their way of thinking from a medical, to a more social model of special needs, it is the question whether these policy changes will lead to truly inclusive education.

The move towards including refugee children - who are also children with special support needs - into local schools, present schools with many challenges (Schoolleidersregister PO, 2016). The problem is that they are integrated in the classroom, but seemingly not included. This is likely the reason why school leaders see a solution in separate language classes, where refugee students from different schools are being brought together to learn the Dutch language (Algemene Vereniging Schoolleiders, 2015). However, in line with the Education For All (EFA) declaration (UNESCO, 1990) and the Salamanca Statement, that was signed by the Dutch government in 1994, ‘those with special educational needs must have access to regular schools which should accommodate them within a child-centred pedagogy capable of meeting these needs’ (UNESCO, 1994, p. 7). Besides this, inclusive classrooms are the most effective means of combating discriminatory attitudes, building an inclusive society, and can improve the efficiency and cost-effectiveness of the entire education system. Therefore, the Salamanca statement urges governments to exchange knowledge with countries that have more experience with inclusive schools. However, currently no literature review on school-based programs for refugee students has been conducted. Because it is important to connect research, policy and practice (Denner, Cooper, Lopez, & Dunbar, 1999), the purpose of this systematic literature review is to therefore investigate what schools in other countries are doing to support their refugee students and facilitate their inclusion in school.

The focus of inclusion should be on removing the barriers to learning that refugee children experience so they can reach their full potential (Bornman & Rose, 2010). A distinction can be made between opportunity barriers and access barriers to participation at school (Beukelman & Mirenda, 2005). Opportunity barriers refer to barriers for learning that are imposed by people other than the child, such as negative attitudes towards refugees, ill
prepared teachers, standardized assessments, lack of parental involvement or limited information for the teacher about the newly arrived child (Schoolleidersregister PO, 2016). Access barriers refer to factors within the child, such as language, literacy skills, acculturation stress, trauma or other psychosocial factors that could hinder learning.

The distinction between opportunity and access barriers will be used to structure the result section of this paper. First, an overview of the barriers that refugee children face in schools will be given, by mainly drawing from the results of a study conducted by McBrien (2005). Then, the methodology of the present study will be explained, followed by the result section that synthesizes the available literature on what schools are doing to address these barriers. In the discussion, the results will be discussed in light of the framework of Beukelman and Mirenda (2005), followed by a discussion about the quality of the included studies and considerations for further research.

Access barriers

Emotional factors

McBrien (2005) conducted a literature review to the educational needs and barriers that refugee students experienced in the United States. One of the findings of this literature review was that most studies on refugee children focused on psychological adjustment, and more specifically moving on from traumatic memories. Common traumatic experiences for refugees are loss of family members, stressful memories of war, memories of their flight from home, and separation from family members that have been left behind. However, besides pre-migration factors, there are also post-migration and ongoing risk and resilience factors that influence the emotional well-being of refugee children. Long insecure asylum procedures, unstable housing, poor financial support, being an unaccompanied minor, perceived discrimination and interracial conflict, exposure to post-migration violence, parental distress and single-parent care all are risk factors for poor mental health outcomes among refugee children (Fazel, Reed, Panter-brick, & Stein, 2012; Laban, 2011; Wilson, Murtaza, & Shakya, 2010).

The majority of refugee children come to school with experiences such as these, which often result in troubled behaviour and has a negative effect on their academic achievement (Strekalova & Hoot, 2008). Examples of specific behaviours that refugee children may exhibit at school are explosive anger, inability to concentrate, age inappropriate behaviour, withdrawal, rule testing, and problems with authority (Blackwell & Melzak, 2000), which can pose many challenges for teachers. Protective factors that on the other hand can prevent
psychological disturbance, include high parental support and family cohesion, support from friends, and positive school experiences (Fazel et al., 2012). With an understanding of refugee children’s pasts and these protective factors, schools can play an important role in helping them deal with these difficulties and strive towards a brighter future.

**Acculturation and identity issues**

Not only personal bereavement, but also cultural bereavement and identity formation issues are an important factor for positive adjustment of refugee children (McBrien, 2005; Strekalova & Hoot, 2008). Questions that are central to forming and reconstructing identity are: where do I belong to? Where do I feel at home? And where do others think that I belong? All of these questions are about belonging, an emotional need that is central to the identity forming process (Hoogesteger, 2013). For refugee children, it can be extremely difficult to construct and manage their own multi-sided identity on top of growing up. They were forced to leave their home country, separated from their friends and family members, and have to build up new relationships in a strange living environment with a different culture, language and set of traditions. This makes resettlement a complex process, as well culturally, socially as psychologically (Gonsalves, 1992, as cited by Hoogesteger, 2013).

According to Berry’s framework (1997), there are four acculturation strategies that individuals use when they attempt to re-establish their lives in another country. Assimilation is the adoption of the host country’s culture while relinquishing one’s own culture; integration means adopting aspects of the host culture while maintaining one’s own culture; separation refers to rejecting the host culture while maintaining one’s own culture; and finally marginalization means neither joining the host culture nor maintaining one’s own culture. In general, the integration strategy is associated with more positive outcomes than marginalization, assimilation or separation, such as better psychological and sociocultural adaption (Berry, 1997, 2005). Acculturative stress on the other hand can lead to feelings of isolation, helplessness, sadness, disappointment, anger, a sense of inferiority, and even depression (Mori, 2000 as cited by Smith & Khawaja, 2011); this thereby hinders adaptation to the new school environment and can form a significant barrier towards inclusion.

When refugee children are uprooted from their culture, it takes time to reconcile traditional beliefs with those of the new country. Therefore, schools have to give refugee children the time and space to adjust to their host country, while at the same respect their native culture and enable them to maintain their cultural identity.
Language and other educational issues

The better teachers know their students, the easier it becomes to respond to their needs and to provide appropriate instruction. However, with refugee children language can be a major barrier to gaining insight into their lives. This partly explains why the second most common theme found in Mcbrien’s (2005) literature review was language acquisition. Most of the studies related to this theme do not focus specifically on refugees but on all students from which the host country’s language is not the student’s native language. All of the studies that were reviewed found that good English language skills (the language of the host countries) were a predictor of positive adjustment; in terms of educational outcomes as well as social inclusion and positive acculturation. This shows the importance of focusing on second language acquisition from the very beginning.

Interrupted schooling, lack of knowledge of the host country’s language, and sometimes minimal literacy also hinders learning and engagement in the regular curriculum (Mcbrien, 2005; Naidoo, 2015). Big differences in educational level require effective classroom management and skilled teachers who can scaffold learning along the content of standardised curricula. The challenge is to look through the “eyes of the learner” instead of through the “eyes of the curriculum” (Bornman & Rose, 2010). However, this can be difficult for schools that are still in transition towards inclusive education and have relatively little experience with differentiated teaching. This places the children at risk of not being able to participate in the educational activities, which could further limit their chances to succeed academically.

The factors within the child that form barriers towards inclusion are not independent factors, but are mutually related and influenced by each other (Richardson, 2008). For example, limited language skills may hinder forming new friendships, and limited social interactions with native speakers will again hinder learning the new language. It is therefore especially the sum and interaction effects of these barriers that puts refugee children at risk for exclusion.

Opportunity barriers

Neoliberal education

Even though the special educational needs of refugee students are often referred to as access barriers, they could also be seen as opportunity barriers, when looked at the issue from a sociological perspective. An example of a socio-political factor that can create educational barriers for refugee students, is the influence of neoliberalism on Dutch education policies,
which is reflected in the focus on academic achievement, testing and competition (Martens, 2014). The danger is that children who perform below average will be overlooked or blamed for their ‘failure’, without examining the influence of social, cultural and economic factors (Thomson, 1998 as cited by Pugh, Every, & Hattam, 2012). This has clear implications for children at risk such as refugee students, who might lack the knowledge or resources to compete with the more privileged students. Therefore, it is important that teachers have knowledge of the educational background of their students, and for example are aware that academic language skills take longer to develop than communicative language skills, so that this is not misinterpreted as low capability (Cheng, 1998, Allen, 2002 & Cummins, 1981, as described in McBrien, 2009). Educating refugees requires instructor sensitivity based on knowledge of refugee experiences and the cultural background of their students, and an awareness of potential culturally biased materials that presuppose familiarity with the host country’s culture and history (Trueba, Jacobs, & Kirton, 1990). The curriculum should provide a learning environment and structure that is suitable for the whole range of students, in order to adopt an inclusive approach to teaching and learning.

**Attitudes**

Not only factors within the child, but also external factors can hinder feelings of belonging to the new school and influence acculturation patterns. The student’s perception of acceptance in the new school setting is an important factor that influences their educational and emotional adjustment, and therefore, it is important that schools create a positive welcoming school climate. It is especially important for refugees who were forced to leave their country, though previous studies raise the concern that negative attitudes towards refugees exist, both at school and within the broader society.

Verkuyten and Steenhuis (2005) did a study on ethnically Dutch preadolescents’ understanding and reasoning about asylum seeker peers and friendships. What they found was that asylum seekers were described more negatively and more often rejected than Moroccan or Dutch peers. The main reasons for this were negative out-group stereotypes, cultural characteristics, and unfamiliarity/own attitudes. Other reasons were more practical, for example, because they were living in asylum seeker centres, spoke a different language, and had a different cultural and religious background which were perceived as making a friendship too difficult. Many of the refugees in the Netherlands are Muslim and because their position has worsened over the last few years in which negative prejudices are prevailing, this can be seen as an extra barrier to their resettlement and integration (Wirtz, van der Pligt, & Doosje, 2016). According to a recent study of Fondation Jean Jaurès, the Foundation for
European Progressive Studies (Renout, 2015) and the Sociaal Cultureel Planbureau (Den Ridder, Dekker, & Van Houwelingen, 2015), Dutch citizens are significantly more negative about the arrival of migrants compared to the citizens of other European countries, and 42% thinks that the Netherlands would be a nicer place to live if there would be less immigrants, which would also apply to refugees.

Some of these studies only measured adult attitudes, but because children tend to adopt their parent’s and teacher’s attitudes through modelling (Gergen & Gergen, 1986), this attitudinal barrier would place refugee children at risk for being excluded from their classroom and making new friendships. It could be argued that prejudices based on religion or culture do not apply to younger children because they are not able to make these kind of distinctions, but previous research contradicts this notion and has shown that in middle childhood, children develop the ability to understand social categories no longer in simple physical characteristics (e.g. ‘dark skin’) but in social psychological terms (e.g. norms and values) (Barenboim, 1981; Livesley & Bromley, 1973, as cited by Cameron, Rutland, Brown, & Douch, 2006a).

Social representation theory posits that understandings and moral judgments depend on socially shared beliefs that are created and recreated through interaction and communication (Emler & Ohana, 1993 as cited by Verkuyten & Steenhuis, 2005). This implicates that stereotypes and prejudices are susceptible to change by making it a topic of discussion, and schools could play an important role in this process. However, avoiding conflicts in the classroom is not only accomplished through dialogue and communicative interventions but also has to do with other factors such as involvement of the community, the curriculum, and classroom management (Peterson & Skiba, 2001). Attitudes are complex and influenced by multiple factors, and therefore can be difficult to address and change. However, by integrating different fields of research, such as the field of social psychology and education, interventions could be developed to change these negative attitudes or prevent conflict. For example, one of the earliest theories about intergroup threat is the realistic conflict theory, which proposes that negative intergroup attitudes arise when one groups’ actions, beliefs or characteristics challenge the goal attainment or well-being of another group (Sherif & Sherif, 1969 as cited by Riek, Mania, & Gaertner, 2006). An implication of this theory would be that the teacher has to make sure that the children in the class do not have to compete for limited resources with the refugee children, such as attention from the teacher or extra instruction time.
Not only attitudes of peers, but also the negative attitudes of teachers towards refugees can be a barrier to inclusion. Walker, Shafer & Liams (2004) studied teacher’s attitudes towards English language learners and the educational programs that serve them. It was found that on the positive side, the majority of second language teachers do not start out with negative attitudes or prejudiced beliefs about their students. Even most teachers without work experience with second language learners were open-minded or at least neutral about the challenge. Rather, little or no training in second language education made them vulnerable for misinformation as presented by media or the public opinion. Negative attitudes emerged when unexperienced teachers encountered challenges and became frustrated or overwhelmed because they did not feel capable of helping their students. The risk of this happening was more likely in isolated communities compared to areas where there are more outside influences, and in rapid-influx schools. As mentioned before, Dutch schools are also often ill-prepared for the influx of refugee children. There are no national laws, regulations or central policies regarding the education of refugee children, nor are there guidelines regarding class size or teacher-student ratio (Rijksoverheid, 2016), which can increase the pressure on teachers even more. According to the results of Walker, Shafer & Liams (2004), this will increase the risk of negative teacher attitudes to develop. If these negative attitudes remain unchallenged, it could lead to further marginalization of minority groups and lessen their chances for a quality education. Therefore, it is important to support teachers and help them gain the skills and confidence to educate this group, as well as develop effective educational policies and interventions to prevent or correct negative perceptions towards refugees, in order to realize their full participation in the education system.

**Parental involvement**

Parental involvement in children’s education is an essential component of effective inclusive education (Xu & Filler, 2008). However, for refugee parents or caregivers there are several barriers that hinder their involvement in their children’s education. Refugees are not always able to provide emotional or educational support to their children to help them succeed socially and academically, because they frequently suffer from trauma’s and many other post-migration stressors. Parents do not acquire the host country’s language as quickly as their children, and even if translators can be obtained, it can be difficult for them to share information about their children or asylum status, which makes it difficult for the teachers to get to know the children and their families (Strekalova & Hoot, 2008). Moreover, because of their cultural background they may understand the concept of parental involvement differently from the other parents (Mcbrien, 2005).
Finally, cultural crossings can also create intergenerational stress and family conflict. For example, for some children in the study described in McBrien’s (2009) review, it was difficult to balance loyalty to family with the individualistic norms and values of the host country. Traditional family roles and responsibilities are often challenged by sociocultural differences and inadequate understandings, which can indirectly have an impact on the child’s well-being (Segal & Mayadas, 2005 as described in Strekalova & Hoot, 2008). Therefore, teachers and other school staff have to be aware of all of these barriers, and should try to actively include their students’ families and try to involve caregivers in the children’s education, in order to ease their resettlement.

There is a lack of research on the barriers towards inclusion that refugee children experience in the Netherlands, but according to the Algemene Vereniging Schoolleiders (AVS) and an estimation from Verus (October, 2015) (association for Christian education) the largest barriers to guiding refugees as perceived by Dutch school leaders, are language barriers, culture differences, trauma processing, and a lack of appropriate learning material (Eggink, 2015). Teachers experience similar challenges, but also emphasize the lack of information about the newly arrived children, inconsistent information provision from Centraal Opvang Asielzoekers (COA) and other health authorities, educational lags because of interrupted schooling, and socio-emotional problems as important challenges (Keulen, 2015), which is mainly in line with the findings of Mcbrien (2005).

**Child ecology**

From the previous sections it can be concluded that inclusion is not only about the teachers and the children, but is influenced by multiple factors on different levels. Support can be offered in both direct as in indirect ways, and target different levels within the system. The bio-ecological model posited by Bronfenbrenner (1999) can be used to order these levels of influence in the environment. The microsystem represents the closest level to the child, and includes interactions of the child with the direct environment such as the family, teachers or peers. The mesosystem represents interactions between the different microsystems, such as communication between home and school. The exosystem represents the contexts that have an indirect influence on the child, such as the school system, organization, policies, or the parent’s workplace. The macrosystem represents the level farthest away from the child and includes national regulations, laws, and the culture, beliefs and values in the society. All these levels in the system are mutually related and interacting with each other over time. Therefore, this study will take a holistic approach and look at how schools are addressing the barriers on each of these levels and provide support for their students. In this context, support refers to
giving help or assistance to the children - directly and indirectly -, beyond to what is normally provided. This includes both formal and informal supports, such as targeted programmes, teacher practices and pedagogies, changes in the school’s organisation, or adaptations in the curriculum to meet the needs of all students.

Aim

The aim of this paper is to conduct an exploratory systematic literature review of what schools are doing to create an inclusive environment and support refugee children entering the education system. The research question is:

What supports are put in place for refugee children to foster their inclusion in mainstream school settings?

Method

A systematic literature search was done in March 2016. Steps included were a database search, abstract and full-text screening, data extraction and analysis, and a quality assessment.

Search terms

The databases Scopus, Psycinfo, Webofscience, Eric, and Sciencedirect were systematically searched using the key terms depicted in Appendix A table 1. In all databases the same search terms were used. The search was set to identify studies in which these terms were used anywhere in the records. In Sciencedirect and Scopus, the search was limited to articles within social sciences because of the scope of the databases and limited time constraints.

Inclusion exclusion criteria

A comprehensive overview of the inclusion- and exclusion criteria is presented in table 2, Appendix B. Inclusion criteria included the study population, goal, setting, design, date of publication, and language. Studies were included if a) the focus was on refugee students; b) the aim was to foster inclusion at school, both directly and indirectly; c) the support was delivered in a mainstream school setting; d) the research design was empirical e) it was published between 1994 (adoption Salamanca Statement) and 2016; f) the article was written in English or Dutch. In order to increase generalizability to the Dutch situation, only studies conducted in Organization for Economic Co-operation and Development (OECD) countries were included (Churchill, 1986). Both qualitative as quantitative studies were included and there were no sample size restrictions. Because of the lack of literature on the issue and the descriptive purpose of this review, low study quality was no criteria for exclusion.

Search procedure

The flowchart depicted in figure 2 in Appendix C presents an overview of the search procedure. 567 articles were identified through database searching, of which 47 were
duplicates. The online systematic review program, Covidence was used as a screening tool (https://www.covidence.org). After title and abstract screening, 455 articles were excluded based on the inclusion- and exclusion criteria. Thereafter, 65 articles were selected for full-text review, of which 46 studies were eliminated because: the study population included mainly immigrant children (n=9); children without Post-Traumatic Stress Disorder (PTSD) were excluded (n=2); no support was offered (n=10) or the support was delivered at a special education school (n=7), in separate language classes (n=3), or in the community (n=1); it was not an empirical study (n=6); because there was no full text available (n=5) or because it was a duplicate (n=3). The search was expanded to hand searches of the reference lists of included studies to ensure that all potentially relevant studies were identified. This resulted in three additional studies that were included. Finally, 19 articles were left for full data extraction.

**Coding and synthesis**

Data extraction included year of publication, country, study design, offered support or intervention components, addressed barriers, ecological level (micro/meso/exo), target group (students, teachers, family, whole school, other), school type and target year/grades, characteristics of the refugee children (origin, unaccompanied yes/no, sample size), used measures and reported outcomes when available.

The offered supports were divided into the types of barriers they addressed: opportunity or access barriers. Access support refers to support that addresses access barriers and attempts to change factors within the child. Opportunity support refers to support that addresses opportunity barriers and attempts to minimize hindering factors outside the child. This does not mean that the access support has to be directed at the child and that opportunity support has to be directed at the environment, since these barriers can also be addressed indirectly. For example, by providing supportive learning material (focus on changing the environment) the children’s language skills (an access barrier) can be improved, and by motivating the child to engage in learning activities (focus on changing the child), teacher attitudes can change (an opportunity barrier).

Supports targeting access barriers were further divided into those that addressed emotional factors, cultural integration, language and other academic issues. Emotional support refers to practices aimed at improving children’s emotional and psychosocial well-being, such as processing traumatic experiences or attempts to expand their peer support network. Cultural integration support refers to attempts to integrate students of various background while also supporting expressions of social, ethnic, and religious diversity. Language and other academic support refers to facilitating inclusion of students in the curriculum, for
example by providing homework assistance, second language support, or by making changes in the curriculum to make it more inclusive of the refugee experiences.

Opportunity barriers were further divided into attitudes, curriculum, and parental involvement. In this study, attitudinal support refers to actions that were taken to target biases, prejudices, stereotypes, negative stands towards refugees for example by teachers, peers or in the community. Parental involvement support refers to attempts to make the school more inclusive for refugee families and to engage caretakers in their children’s education.

Quality assessment
The evidence pyramids of Hennessy, Finkbiner and Hill (2006) and Daly (2007) served as guidelines to assess the strength of various research designs. The hierarchy of Hennessy was used for quantitative studies (see table 3 in Appendix F) and the hierarchy of Daly et al. (2007) was used for qualitative studies (see table 4 in Appendix F). The hierarchy of Hennessy, Finkbiner and Hill (2006), distinguishes 6 types of quantitative studies that are ranked, depending on the degree to which controlling methods are implemented. According to this hierarchy, meta-analyses, replicated randomized controlled trials, and quasi-experimental designs present the strongest level of evidence. Pilot studies, case studies and observational studies present the lowest level of evidence, because they don’t make use of controlling methods and do not seek to control for environmental influences.

The hierarchy of Daly (2007), distinguishes four types of qualitative studies that are ranked from presenting the highest to the lowest level of evidence: generalizable studies, conceptual studies, descriptive studies, and single case studies. Generalizable studies use a conceptual framework to get a diversified sample and present all data for analysis. Conceptual studies also present and analyse all data according to conceptual themes, but are lacking a diversified sample. Descriptive studies also lack a diversified sample, and do not report the full range of responses but provide quotations to illustrate the data analysis. Case studies present the lowest level of evidence because they describe a small, non-diversified sample, and do not analyse applicability or generalizability to other contexts.

The checklists for qualitative research developed by the Critical Appraisal Skills Programme (2013), the checklist for quantitative studies developed by the Effective Public Health Practice Project (1998), and an adapted version of the checklist for mixed method studies developed by Pluye et al. (2011) were used to rate the quality of the included studies. Both low and high quality studies were included because of the lack of research on the topic of interest. The goal of this critical appraisal was solely to assess the quality of reporting and
methodological rigour, as part of the exploration process and identify directions for future research.

**Results**

The 19 included studies described school-based supports for refugee children and were all published after 2000. For a summary and overview of the included studies, see Appendix D. The studies varied considerably in approach, methodology, the nature of the support services and target group. Participating students ranged in age from 5 to 18 years. Not all studies reported on the country of origin of the refugee students, but as far is known most came from Sub-Saharan Africa. Of the 19 studies, 12 were conducted in Australia, three in the United Kingdom, two in the United States of America, and one in the Czech Republic.

Five of the included studies took a whole-school approach to support their students and addressed multiple barriers, while the other studies focused on one or a few specific barriers to inclusion and discussed their approaches in more detail. Most articles (n=10) had a main focus on access barriers - that is factors within the child - such as language and other academic barriers (n=7), emotional needs (n=2) and cultural integration (n=1). Articles that had a main focus on opportunity barriers (n=2) addressed attitudes (n=1) and parent involvement (n=1). Further on, many of the articles addressed multiple barriers (n=11) instead of focusing on only one aspect of inclusion. For a concise overview of the barriers that the studies addressed, see figure 1. For a more comprehensive overview of the studies and the barriers they addressed see Appendix E.

The studies that took a holistic, whole-school approach to support their refugee students offered different types of support to meet their refugee students social, emotional and learning needs (Beirens, Mason, Spicer, Hughes, & Hek, 2006; Block, Cross, Riggs, & Gibbs, 2014; Hughes & Beirens, 2007; Pugh et al., 2012; Sidhu & Taylor, 2009; Taylor & Sidhu, 2012). Because these studies mainly described changes made on exo-/organisational level, the support services and outcomes were often described in a general, inconclusive manner. Therefore, relevant information about the interventions was extracted from the articles themselves and when necessary, the programme guides and manuals referred to in these articles were consulted if they were available online. In order to keep structure, the offered support services and practices in these studies will be listed together if possible, with a focus on similarities and differences between the programs, rather than being described per article.
Figure 1 Offered supports and addressed barriers

**Access support**

**Emotional support**

A broad range of emotional support services was identified. Common approaches that emerged were the encouragement of creative expression, such as visual art, drama, diary writing, or music therapy, to improve the children’s psychosocial well-being (Beirens et al., 2006; Hughes & Beirens, 2007; Rousseau & Heusch, 2000; Taylor & Sidhu, 2012) and provision of after school activities, such as sport and other recreation projects (Beirens et al., 2006; Block et al., 2014; Hughes & Beirens, 2007). One school started a creative expression project that indirectly also intended to support their students’ cultural integration, by using storytelling and drawing to ‘build a bridge between the past and the future by attaching meaning to experience, and help children reconcile their two cultural worlds’ (Rousseau & Heusch, 2000). Children in a third-grade class were asked to illustrate, talk and write about a character who went on a trip to another country. The main themes were life in the homeland, the journey, arrival in the new country, and the character’s future. The sessions were led by a teacher and an art therapist, and were held once a week for 6 weeks. Besides analysis of the stories and drawings there was no direct measure of the effectiveness of the intervention, but nevertheless the authors concluded that the sessions helped the children make sense of traumatic experiences and dislocation.

Other schools provided emotional support by offering more conventional therapeutic services, such as hiring counselling staff or establishing partnerships with other institutions and community organisations that can provide mental health services (Beirens et al., 2006; Block et al., 2014; Hughes & Beirens, 2007; Pugh et al., 2012; Sidhu & Taylor, 2009; Taylor & Sidhu, 2012). In order to facilitate collaboration, schools often hired liaison officers or
assigned link teachers to act as a bridge between the school and the service. One study described a school-based mental health service that was implemented in three schools, and not only targeted the children but also their teachers (Fazel, Doll, & Stein, 2009). The services consisted of weekly meetings with a teacher and a mental health professional. During these meetings, refugee children were discussed and if there were concerns about the behaviour of a child, interventions by the teacher were suggested. The content of these interventions was not specified. If the intervention was insufficient or if there were significant concerns about a child, the teacher would contact the parents and introduce the mental health service. Several treatment options were considered: family work, psychodynamic individual therapy, group work and additional crisis intervention work. Most of these interventions took place at the school. To assess the effectiveness of the intervention, questionnaires of psychosocial functioning were completed by the teachers before and after the intervention. The outcomes suggested that the service was effective, possibly because it enhanced teachers’ understanding and encouraged communication and cooperation with parents and other organizations. The greatest benefit for refugee children was seen in changes in hyperactivity and emotional symptoms, and for the children directly seen by the mental health professionals for problems with peers.

The School Support Programme (SSP), described in Block, Cross, Riggs and Gibbs (2014) also tried to raise awareness and understanding of refugee experiences. The programme was provided to networks of schools in a region and aimed to facilitate partnerships between schools and agencies. Based on a holistic model for a whole school approach, it addressed the learning, social and emotional needs of refugee children. The schools that participated in the program had to commit to setting up a Refugee Action Team made up of key school staff to implement the program, and attend professional learning workshops, of which the content was supported by the “School’s In for Refugees” manual (VFST, 2004). The workshops were attended by all staff at the school and focused on: policy and practice; curriculum and programmes; organisation; ethos and environment, partnerships with parents, and partnerships with agencies. After the workshops, schools completed the Refugee Readiness Audit that provided them with an overview of their strengths and weaknesses based on the areas listed above. Accordingly, an action plan was made to provide support for refugee background students (Block et al., 2014). Suggestions given in the manual to support student’s emotional well-being included: referral assistance for teachers when a child’s behaviour requires specialised assistance; advise about how to build positive relationships with refugee students; how to deal with emotional blocks to learning; how to
create a safe school climate; advice for teachers about how to cope with their own stress and emotional reactions. For a comprehensive overview of offered emotional support services, see the “School’s In for Refugees” guide (VFST, 2004). Well-being outcomes were not measured in the study by Block et al (2014), but anecdotal reports from interviews conducted with participations revealed that they believed that there was an improved understanding of the refugee student’s experience, access to more resources, and access to additional (emotional) support had made their schools places that were better able to meet their students emotional and social needs, and had led to positive well-being outcomes.

**Cultural integration support**

In several schools there was an attempt to create an inclusive school environment by celebrating and promoting cultural diversity and tolerance, for example in the school ethos, mission statements, school prospectuses, by introducing multicultural days, culturally sensitive teaching, or making changes within the curriculum (Block et al., 2014; Nwosu & Barnes, 2014; Pugh et al., 2012; Taylor & Sidhu, 2012). Other strategies included offering professional development courses to educators, such as cultural awareness workshops with community members (Pugh et al., 2012), providing students with material assistance for clothing, food, educational materials or excursions (Sidhu & Taylor, 2009; Taylor & Sidhu, 2012), setting up a support team for newly arrived children who assist their them during their transition and enrolment at school (Beirens et al., 2006; Block et al., 2014; Hughes & Beirens, 2007), hiring ethnically diverse personnel, empowering students by placing emphasis on individual agency and self-appreciation, trying to involve families and the community, and inquiry-based teaching about conflicts (Nwosu & Barnes, 2014).

However, not all schools made such shifts and found that inflexibility of the school system and time constraints prevented significant changes to be made (Block et al., 2014). According to the interviewed participants the strategies to create an inclusive, welcoming school environment had had a positive impact on the schools and their students, but the separate effects of these practices on the students’ cultural integration or well-being were not directly or systematically measured.

**Language and other academic support**

Many studies aimed to meet the educational needs of refugee students, by improving their language skills, literacy skills or overall academic achievement. Three studies were mainly targeted at teachers and their responses to the challenge of educating refugee students (Bačáková & Closs, 2013; Dooley, K.T., Thangaperumal, 2011; Dooley, 2009). Dooley
(2009) described teacher responses to teaching refugee-background students with limited English and literacy skills. It was found that some teachers offered extra lessons to assess and practice reading together with their students, by using a mix of standard code-breaking activities and reading activities. In addition, teachers modified the way they taught content in class by making use of a genre approach, which entails “developing students’ knowledge of the content and academic language for an assignment, explicit teaching of linguistic and text-level features of the genre in which they need to write, and opportunities to co-construct texts with the teacher before working independently” (Dooley, 2009, p. 12). Other schools had teacher aides inside the classroom, who could offer extra within-class support to the students when necessary. The teacher’s mentioned the importance of a) scaffolding teaching, being flexible and adapting to the level of the student b) exploring and building up concepts when preparing students for an assignment and to make links to the student’s prior knowledge (e.g. about culture, countries, history etc.) c) encouraging students to work independently if possible, while trying not to overwhelm them and give them something else they find interesting to do when a task is too difficult, as a base for conceptually deep and critical work. However, there was no measure of the effectiveness of these teacher’s practices. Dooley & Thangaperumal (2011) focused more on the social and cultural aspects of literacy pedagogy. They found that all schools had a genre teaching approach, but that the teachers were providing more controlling ways of instruction to teach students the technical aspects of literacy and genre analysis than would be expected. Again, there was no direct measure of the effectiveness of this approach, but it was argued that it should be supplemented by more dialogic teaching methods, that enable students to make links to their own experiences and empower them to critically analyse texts.

The notion that teachers are the key to quality inclusive education is also supported by Bačáková & Closs (2013), who described a Continued Professional Development (CPD) seminar for teachers about refugees. The content of the seminar contained information about: the characteristics, background and experiences of refugee students; how to use educational support measures such as teaching assistants, individual education plans, after-school activities, homework clubs, peer-support, formative assessment, second language teaching and availability of appropriate teaching materials; appropriate grade placement according to their age and educational history; induction programmes for refugee students, their families and future classmates; and opportunities for future CPD. During the seminar, teachers were also given the opportunity to share experiences and concerns with more experienced staff and the lecturers. The teachers were positive about the seminar which motivated some to
undertake further CPD training on the issue. Other positive outcomes were that schools applied and obtained grants for educating refugee children, improved support provision, prepared individual education plans, and placed children in ‘more appropriate grades’.

One study addressed literacy barriers not by focusing on teacher’s practices but on the learning material, through a science vocabulary project (Miller, 2009). A science dictionary and support materials for the textbook were produced by the researchers, and eventually offered to a year 8 science class. The texts and explanations were adapted in a way so that they were accessible to low literacy learners, by combining literature on scaffolding and on vocabulary learning. Examples of adaptations that were made are: the use of illustrations; repetition and recycling of vocabulary across activities; and inclusion of cooperative learning and the possibility for negotiation of meaning in groups. The findings of the study were positive, in that the students reported that they had found the support materials useful.

Several programs addressed educational barriers by offering extra homework assistance to their students, which in some cases was also a form of social support (Beirens et al., 2006; Block et al., 2014; Ferfolja & Vickers, 2010; Hughes & Beirens, 2007; Naidoo, 2008; Sidhu & Taylor, 2009; Weekes, Phelan, Macfarlane, Pinson, & Francis, 2011). In the Refugee Action Support (RAS) program, the students were supported in small groups by preservice teachers for one semester (Ferfolja & Vickers, 2010; Naidoo, 2008). For the tutors, the project was part of their professional experience placement that they had to undertake during their teaching qualification. In the Classroom Connect Project the support was offered by volunteer adult tutors, either one-to-one or in small groups, for an entire school year (Weekes et al., 2011). In both projects, only the coordination teachers and community liaison officers were paid to coordinate the centres and supervise the project. Each school implemented the program differently: some offered support in class while others withdrew the students from the classroom. The benefits of in-class support were that the students could keep up with class work and that the tutor could see where the class was up to. However, the downside of in-class support was that the students were scared of being stigmatised and therefore did not want to receive help in a noticeable way. Also, some students preferred to work in a quieter environment and for the tutors it was easier to give the students individualised attention and to build rapport in a separate room. The outcomes of the studies were overall positive: teachers saw increased educational participation as well as attainment, confidence, self-esteem, social inclusion in Australian society (Ferfolja & Vickers, 2010; Naidoo, 2008; Weekes et al., 2011), improvement in literacy and motivation (Naidoo, 2008), and better organisational skills (Weekes et al., 2011). However, an important limitation of the studies of Ferfolja and Vickers
(2010) and Naidoo (2008) is that none of them interviewed the refugee students themselves and solely relied on tutor and teacher reports to evaluate the programs. One benefit of the RAS program (Ferfolja & Vickers, 2010; Naidoo, 2008) compared to the CCP (Weekes et al., 2011) is that the adults were often experienced teachers and that the length of time with students gives the opportunity to build mentoring relationships. On the other hand, when it comes to implementation it might be more difficult to find adult volunteers, than to find to students who receive credits for participating in the project.

One study described a multicultural school in Australia, that tried to engage refugee students in learning through a community garden project as part of the curriculum (Hardy, Grootenboer, Hardy, & Grootenboer, 2013). The project was not only intended to meet the student’s educational needs, but also their psychosocial needs, and to stimulate positive integration in school and Australian society. The goal was to create practical informal learning opportunities and to involve the community and families with the school through the garden, and thereby creating cultural awareness. A cultural development officer and a community development officer were hired to encourage and engage teachers, and to create better liaison with the community. Because everyone contributed something to the project, no additional funding was needed. The findings of the study were overall positive and showed that sharing activities had led to enhanced relationships with the community and improved students’ confidence, well-being and engagement in school.

In the School Support Programme (Block et al., 2014) Children’s Fund program (Beirens et al., 2006; Hughes & Beirens, 2007) and New Arrivals Program (Pugh et al., 2012; Taylor & Sidhu, 2012) curriculum, teaching and learning changes were made across the whole school. These included specialised support for refugee-background students, such as second language support, numeracy and literacy programs, the introduction of individual learning plans, professional development courses for teachers and decreasing class sizes. The intervention guide in Block (VFST, 2004) also mentioned the importance of pedagogic strategies such as allowing for gradual participation, giving exemptions from difficult tasks, and setting achievable goals and praising effort, in order to facilitate their adjustment at school. Most articles emphasised the need for collaboration with community organisations and appropriate funding for support staff, such as second language teachers, teacher aides, coordinators and interpreters, in order to provide effective educational support. Learning outcomes were not measured in any of the studies above, but according to the interviewed participants, participation in the programs had led to better academic achievement and inclusion at school.
Opportunity supports

Attitudes

Most of the included studies addressed attitudes indirectly, for example through professional development training activities or engaging the community with the school (Bačáková & Closs, 2013; Block et al., 2014; Hardy et al., 2013; Pugh et al., 2012; Sidhu & Taylor, 2009; Taylor & Sidhu, 2012). None of these studies explicitly described how the intervention would influence attitudes, nor were attitudes directly measured. However, according to most interviewed participants the school’s practices had a positive influence on perceptions of refugees, and the student’s social and educational inclusion at school.

Only one study had a main focus on attitudes and focused solely on peers, by evaluating an intervention that was aimed at changing children’s intergroup attitudes toward refugees (Cameron et al., 2006). Three different theoretical models of extended contact were tested by reading stories to children about refugee children in friendship situations. After reading the stories, the children took part in group discussions about the stories which were led by one of the researchers. The intervention of consisted 6 sessions, spread over 6 weeks. After the intervention the children were interviewed and completed questionnaires measuring intergroup attitudes. The outcome of the intervention was positive and indicated that children’s attitudes towards refugees had improved, namely in the ‘dual identity condition’. The goal of this condition was to promote a superordinate identity while simultaneously encouraging retention of a subgroup identity. Although it can be questioned whether this effect is sustainable over a longer period of time, the findings suggest that extended contact with refugees can lead to prejudice reduction in young children.

Parent involvement strategies

Most studies addressed parental involvement indirectly, or while simultaneously also addressing other barriers towards inclusion. The Continued Professional Development seminar described earlier (Bačáková & Closs, 2013) and the professional learning workshops in the School Support Programme (Block et al., 2014) both addressed partnerships with families by providing advice and communication strategies for how to involve parents in their children’s education. Other strategies included employing interpreters and organising parent meetings (Bačáková & Closs, 2013); using multicultural education aides for cultural advice; translating school documents; increasing awareness of common issues for refugee parents; and provision of guidelines for informing and consulting the parents (Block et al., 2014).
The outcomes of the study by Bačáková & Closs (2013) showed that even after participation in the program, there was insufficient home-school collaboration (i.e. weak mesosystem). None of the schools employed an interpreter because of the high costs. Other reasons given by the schools for not undertaking action to involve refugee parents, were their limited knowledge of the Czech language and teachers’ perception that there was no need to involve the family. The schools participating in the SSP programme on the other hand, did increase their use of interpreters to aid communication between parents and staff (Block et al., 2014). According to the interviewed participants, attending the workshops had led to a better understanding of the refugee experience and deeper empathy for families. It appeared that primary schools were more successful in involving caretakers in their children’s education than secondary schools, but in both type of schools’ interaction with families had improved.

The interventions that were based on a holistic, whole-school approach, also mentioned the importance of parental involvement. Actions that were undertaken to increase parent’s engagement included: hiring support staff, such as interpreters, bilingual school service officers, community liaison officers, or new arrival officers, to aid communication with parents (Block et al., 2014; Pugh et al., 2012; Sidhu & Taylor, 2009; Taylor & Sidhu, 2012); assisting families with school enrolment; providing information and advice about their rights and services, and helping them access available provision in order to remove practical family stressors (Beirens et al., 2006; Hughes & Beirens, 2007; Sidhu & Taylor, 2009); using visual resources to provide information about the education system (Taylor & Sidhu, 2012); and engaging parents through the school’s governing council (Pugh et al., 2012).

One intervention had a main focus on increasing parent involvement in school (Rah, 2013). A case study was conducted to explore how an elementary school in the United States addressed the needs of unexpectedly received refugee students and their families. The FAST (Families And Schools Together) after-school program that consisted of eight weekly sessions was customized for the particular needs of refugee families. Family therapy and play therapy methods were used to strengthen family bonds, encourage parental involvement at school, and increase school readiness. Components of the intervention included: making a family flag, having a traditional meal together, communication games, parent groups to talk about raising children in US, ‘special play’ in which parents where coached in playing with their child, a lottery and closing ceremony. The outcomes of the intervention were not clearly stated, besides that most parents reported that their relationship with school staff had improved after the intervention.
Discussion

In order to promote participation in school, refugee children should be able to make use of the general facilities that are available for all children, but when necessary, they should also be able to make use of special facilities (UN General Assembly, 1951; UNESCO, 1994). This paradox is further complicated by the debate about how inclusion should be defined. In this study, it was argued that the focus should be on removing the barriers towards learning so that these children can reach their full potential (Bornman & Rose, 2010). A systematic literature review was conducted, to synthesize the research on school-based supports and practices that are put in place for refugee students to foster their inclusion in mainstream schools, by removing the barriers to learning they experience. A distinction was made between access barriers, that is factors within the child, and opportunity barriers, that is factors outside of the child. Due to the lack on research of this issue, the aim was not to assess the effectiveness of these supports but to explore what schools are doing to meet the needs of their students.

Addressed barriers

A broad range of support services were uncovered (see Appendix E). Most reviewed studies focused on access barriers, by concentrating on language or other educational support (n=7) and emotional support (n=2). This is in line with the findings of McBrien (2005), who reviewed the literature on the barriers that refugee students face in schools, and found that the most common themes discussed in the literature were emotional needs and language needs. Some of the studies focused on teacher pedagogies and expertise, while other studies focused on adapting learning material in order to make it accessible for all students, or extra homework assistance and language support to meet refugee students' educational needs. Common emotional support services or practices that emerged, were the encouragement of creative expression, provision of mental health therapeutic services, and professional development trainings for school staff to raise awareness and understanding of the refugee experience.

Less attention was payed to promoting cultural integration and opportunity barriers, such as negative attitudes or parental involvement. Most studies addressed these opportunity barriers indirectly, or simultaneously while also addressing other barriers. Five studies took a whole-school approach and commented on the organizational changes the schools had made. Common features of the offered supports described in these studies were an ethos of inclusion, parent and community involvement, and a holistic approach to education that addresses emotional, learning and social needs. Schools tried to promote positive integration by promoting cultural diversity and creating a welcoming school environment, which also
could be seen as an indirect attempt to combat negative attitudes. The study of Nwosu and Barnes (2014) is one of the few studies that took acculturation frameworks into account, but the students themselves were not interviewed and besides interviews with school staff, there was no measure of the effectiveness of these practices.

Negative attitudes and parental involvement were often addressed by providing professional development trainings for school staff, or attempts to engage the community with the school. Previous research supports teacher training as a possibly effective strategy, since it has shown that negative attitudes are more likely to emerge when teachers are unexperienced or feel overwhelmed because they do not feel capable of helping their students (Walker et al., 2004). Other strategies to increase parental involvement, included hiring extra support staff and liaison workers to aid communication with parents, or offering informational support in order to remove practical family stressors. Only one study focused mainly on attitudes and aimed to change children’s intergroup attitudes toward refugees. The results of the study were positive and suggest that schools can play an important role in promoting a more accepting environment.

**Reflection and suggestions for future research**

A possible explanation as to why most studies focused on access barriers such as educational and emotional needs, is that there is more research conducted in these fields (Promising Practices Network, 2014). It might be easier to adapt support services for children with special needs that are already available, such as cognitive behavioural therapy or homework support, than to develop new support services that for example address negative teacher attitudes.

The finding that most support services addressed access barriers, also implies that the refugee child is seen as the problem instead of the environment. However, inclusion is not only about changing the child, but also about adapting the environment to the needs of the child (Bornman & Rose, 2010). Yet, it might be more difficult to address factors outside the child that hinder their participation at school, than to address factors within the child. Supports that address access barriers are more often focused on the micro level, which has the greatest impact on the child (Bronfenbrenner, 1999), while supports that address opportunity barriers are usually targeted at the meso-, exo- and macro-level. Especially barriers on macro-level, such as negative attitudes in the society towards refugees, may be less tangible and beyond the scope of influence of the school, and are therefore more difficult to address. Another example of a factor on macro level that can create an opportunity barrier for refugee students, is the influence of neoliberalism on Dutch education policies, which is reflected in
the focus on academic achievement, testing and competition (Martens, 2014). As a result, refugee children in the Netherlands, are often placed in classes below their own age because of their educational lag (Eggink, 2015). However, none of the studies addressed this socio-political factor. Only a few of the included studies briefly mentioned the importance of an inclusive curriculum and appropriate grade placement, but none of these studies offered concrete advice or specified the content of such a curriculum and the meaning of ‘appropriate placement’. Therefore, the question whether it is more ‘inclusive’ to place a child with same-age children or with children who are at the same educational level, remains.

Even though less attention was paid to opportunity barriers compared to access barriers, these can also form significant barriers towards inclusion (Beukelman & Mirenda, 2005; Bornman & Rose, 2010). While acknowledgement and an understanding of trauma is essential, there seems to be a tendency to adopt a deficit model and to treat refugee children as victims rather than emphasizing their strengths and resilience (Correa-Velez, Gifford, & Barnett, 2010; Matthews, 2008). However, not only pre-displacement factors, but also post-displacement factors have an impact on their development. The effects of social exclusion and stressors associated with resettlement can have a bigger negative effect on mental health and well-being than those of trauma (Correa-Velez et al., 2010; Laban, 2011). Therefore, it is necessary to also look at post-migration factors that impact children’s resettlement instead of overemphasising the impact of pre-migration experiences. Also, instead of taking a deficit approach and focusing on what is lacking in the student, it would be beneficial to look at the strengths of the child (Jimerson, Sharkey, Nyborg, & Furlong, 2004) and the benefits of having multicultural classrooms. For example, it offers the opportunity to discuss social theme’s, learn about different cultures, and stimulates thinking about globalisation. Also, instead of seeing bilingualism as a problem it could be seen as a strength, since research has shown that bilingualism is associated with a number of positive cognitive outcomes (Adesope, Lavin, Thompson, & Ungerleider, 2010).

Most schools supported their students by offering extra language lessons or by providing after-school homework support. Though, one of the challenges that Dutch primary school teachers face is that they don’t know how to differentiate teaching within the classroom, if there are big differences in language and academic level (Algemene Vereniging Schoolleiders, 2015; Eggink, 2015; Schoolleidersregister PO, 2016; Van Baars, 2015). Therefore, more research on classroom management strategies and how to adapt learning material to meet the needs of all students, are needed in order to attain truly inclusive teaching.
In order to facilitate refugee students’ inclusion into mainstream schools, positive interactions between the different systems – that is the family, peer groups, teachers, community workers and other service providers – have to be promoted (UNESCO, 2005). Therefore, it is important that schools have a good understanding of the needs of all parties involved, in order to respond effectively to these needs. The studies included in this review mainly focused on the needs of teachers and other school staff, refugee children themselves, and their families, though none of the studies focused on the needs of other academic peers. However, it would be interesting to know more about what impact the influx of refugee children in mainstream classrooms has on peers, especially since they may be affected by the negative attitudes towards refugees modelled by their parents (Verkuyten & Steenhuis, 2005). Support from friends is a protective factor that can prevent negative mental health outcomes in refugee children (Fazel et al., 2012), therefore more research should be conducted towards how schools can promote positive peer interactions.

The studies that took a holistic, whole-school approach tackled multiple barriers, and therefore it seems more likely that they will to lead to inclusion of refugee students in schools. However, a problem with these studies is that the rationales and assumptions underpinning the support services were often implicit within the support programmes, and that the (sub)goals were often not specifically stated. However, in order to critically evaluate programmes, it is important to make the rationales, assumptions and goals underlying the programme explicit (Connell & Kubisch, 1998). For example, how is inclusion in school defined? Is the goal of the programme to increase engagement in specific school activities, that the students attend their classes more frequently, or to improve their grades? Only once a clear framework has been established that guides the evaluation of the programme, can links be made between changes to be achieved in the services and outcomes for those targeted by the programme.

Also, most studies did not describe the students’ countries of origin or their potentially differing educational experiences and needs. However, according to Hennessy (2006) it is of importance to “recognize the importance of cultural diversity and provide complete descriptive information on the populations for which interventions have been developed and applied” (p.6). As cultural factors can influence the outcome of an intervention, it is important that the target population and sample are clearly described in order to address the generalizability and applicability of the results. However, a challenge will be to balance the benefits of collecting data in order to increase replicability and the danger of stigmatising refugee students as a problem (Schweitzer, Steel, & Steel, 2008).
Finally, it is important to involve refugee children themselves from the very beginning in the research process. This is a necessity, not only to empower the students and ensure that their needs are being met, but also to increase the reliability of the data analysis and interpretation of cultural nuances (Franks, 2011). However, most studies interviewed school staff and other professionals to evaluate the offered support, and only 8 out of the 19 studies interviewed the students themselves. Future research projects should try to involve refugee students more in the research process and write transparently about the participative processes, so that refugee children become the stakeholders in the research.

Quality of included studies

In general, the findings of the studies were positive and showed that the schools’ efforts to meet their student’s needs were effective. However, the quality of evidence for a program depends on the research design and the degree to which controlling methods are implemented. Of the included studies, only one study did a single randomized control trial (Cameron et al., 2006) and one study had a quasi experimental research design (Fazel et al., 2009). The rest of the included quantitative (mixed-method) studies used a single group pre-test or post-test design to assess the effectiveness of the offered support (Block et al., 2014; Ferfolja & Vickers, 2010; Miller, 2009), which present the second lowest levels of empirical evidence according to the evidence pyramid of Hennessy, Finkbiner and Hill (2006). Important limitations of these type of studies is that it is difficult to determine whether the observed outcomes are a consequence of the offered supports, and to rule out other confounding variables or possible explanations. Moreover, these type of studies don’t measure the sustainability of the support effects, and therefore another recommendation for future research would be to conduct longitudinal studies in order to see whether change is sustainable over time.

Most of the included qualitative studies were descriptive studies (Bačáková & Closs, 2013; Beirens et al., 2006; Dooley, K.T., Thangaperumal, 2011; Dooley, 2009; Hughes & Beirens, 2007; Naidoo, 2008; Rousseau & Heusch, 2000; Sidhu & Taylor, 2009; Taylor & Sidhu, 2012; Weekes et al., 2011) or single case studies (Hardy et al., 2013; Nwosu & Barnes, 2014; Pugh et al., 2012; Rah, 2013), which represent the lowest research levels of evidence according to the hierarchy of Daly (2007). Limitations of these study designs is that they do not analyse applicability to other contexts, they do not report the full range of responses, and their samples are not diversified to analyse how or why differences occur.

It can be concluded that there is a lack of quantitative studies on programs that support refugee students at school. Conversely, research involving refugees involves particular ethical
issues (Schweitzer et al., 2008) which complicates the use of controlling measures and may require qualitative approaches that capture the complexity of the human experience. However, for policy makers, funders, providers and the users of support services it is important to know whether the offered support is effective and has a measurable effect. Therefore, more studies that make use of controlling methods and use longitudinal designs, complemented by alternative methodologies such as interpretative phenomenological analysis, are needed to assess the effectiveness of programmes that promote the inclusion of refugee students in school.

After a critical appraisal of the quality of the included studies, it appeared that most of the included studies were of low quality (see Appendix G). Few studies justified the research design and chosen methods, and there was no relationship between the type of offered support and data collection strategy. In many cases, interviews were used to evaluate the offered support, but the interview method was often not made explicit, nor was it described how the relationship between researcher and participants was taken into consideration. Therefore, more studies of higher quality are needed in order to critically evaluate support services. Moreover, few studies took ethical issues into consideration to a sufficient degree, even if the refugee students themselves were involved in the research project. Future studies should give sufficient details of how the research was explained to participants, discuss issues around informed consent and confidentiality, how they have handled the effects of the study on the participants during and after the study, and whether approval has been sought from an ethics committee, so the reader can assess whether ethical standards were maintained.

**Implementation issues**

Most authors agreed that support services need to be well-coordinated and properly funded. Strategies or plans that are not executed are most likely too complicated, expensive or time consuming, because the advantages of the support have to outweigh the costs and required efforts of the implementation. This can be a problem for implementation of the programs in Dutch schools, since they can only apply for extra budget when they take in more than 10 asylum seeking children (Dekker, 2015). Because schools often lack the resources and knowledge to meet their students needs, close cooperation with the community and establishing partnerships is essential, and can be a way to relieve the burden placed on schools (Sidhu & Taylor, 2009). However, there are also several limitations to these partnerships that have to be kept in mind. Organizations don’t necessarily have common goals and might have different ideologies and expectations. For example, the tendency to medicalise refugee children could be related to the type of institutions that schools establish partnerships with.
Mental health organisations might be inclined to focus on trauma instead of post-migration stressors, which can continue to shape the focus of schools and content of professional development trainings. Also, it is difficult to control the quality of the services offered by these organisations and to deal with the accompanying administrative and managerial requirements. To address this, several schools hired liaison staff, service coordinators or assigned teachers to act as a link between the school and the service providers. This implies that effective implementation will require strong leadership and structural changes to be made in the school system. However, it is expected that effective service coordination and integration will result in better outcomes for everyone involved (Bruder, 2005) - especially when a holistic approach is needed.

The studies that took a holistic, whole-school approach aimed to tackle a broad range of barriers towards inclusion, and therefore the support services were often described in a general, incomplete manner. Therefore, more comprehensive descriptions of the offered support that include practical aspects, such as needed materials and resources to support implementation, are required, so that the programmes can be replicated in different settings, such as in the Netherlands.

Limitations and methodological discussion
There are several limitations of this study that are worth noting. Firstly, because of the lack of research on the issue it was chosen to include all studies that met the inclusion and exclusion criteria. A broad range of support services was identified and because most of the included studies were of low quality, it was beyond the scope of this review to compare the effectiveness of the provided supports and further research is needed to investigate this.

There were limited peer-reviewed studies available to describe the situation of refugee students in the Netherlands. Therefore, organisational reports with documented interviews from teachers and school leaders were used instead to find information about the situation in the Netherlands, although the reliability of these reports is not known.

Secondly, there was no second reviewer to control the data collection and data analysis process. It is possible that due to the search strategy, relevant studies were omitted and that there may be more known about this topic than is presented in this review. Also, the quality assessment protocols inspired by the Critical Appraisal Skills Programme (CASP) (2013) and the checklist developed by Pluye et al. (2011) are not validated tools to rate the quality of the included studies. Therefore, the data analysis and quality assessment were relatively subjective methods, and the interpretations could have been influenced by the background and experiences of the researcher.
The majority of the studies that were included were conducted outside of Europe, of which 11 in Australia. The way refugee students are managed in that system differs considerably to the Dutch system. For example, upon arrival in Australia, refugees of high school age go to an intensive language school for approximately 12-18 months, and after that they spend one or two terms in an English as a Second Language (ESL) unit within a mainstream school, before they enter a mainstream class (Sidhu, Taylor, & Christie, 2011). However, despite this ‘preparation phase’ there are still many barriers towards inclusion in mainstream schools, and therefore, several studies were conducted to investigate how schools facilitate their transition into regular schools. The rest of the studies included in this review were conducted in the United Kingdom (n=4), United States of America (n=2), the Czech Republic (n=1), and Canada (n=1). The situation of refugees, the educational systems and languages spoken in these countries are not similar to the Netherlands, and this may limit the generalizability of the results.

**Conclusion**

Despite the limitations, this review offers a synthesis and appraisal of the available literature on supports that are put in place for refugee children to foster their inclusion in mainstream school settings. It can be concluded that schools can play an important role in supporting the inclusion of refugee children and their families because of their accessibility, but that more research is necessary in order to assess the effectiveness of supports that minimize barriers towards learning and promote their inclusion in school.
References


migranten.dhtml


Smeets, E. (2007). *Speciaal of apart: Onderzoek naar de omvang van het speciaal onderwijs*


### Appendix A

<table>
<thead>
<tr>
<th>Table 1 Search terms</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Population terminology</strong></td>
</tr>
<tr>
<td>Refugee* OR asylum seeker* AND</td>
</tr>
<tr>
<td><strong>Age terminology</strong></td>
</tr>
<tr>
<td>School aged children (6-18 years)</td>
</tr>
<tr>
<td>Adolesc* OR Teen* OR young adult* OR Youth* OR Child* OR child OR Juvenile* OR student* OR pupil* AND</td>
</tr>
<tr>
<td><strong>Exposure terminology</strong></td>
</tr>
<tr>
<td>Intervention* OR support* OR program* OR facilitat* OR practice* OR promot* OR help* OR aid* OR prevention OR prevent* OR accomodat* OR improv* OR strategies AND</td>
</tr>
<tr>
<td><strong>Setting terminology</strong></td>
</tr>
<tr>
<td>School* OR education* OR classroom* AND</td>
</tr>
<tr>
<td><strong>Outcome terminology</strong></td>
</tr>
<tr>
<td>Inclusi* OR includ* OR involv* OR involvement OR participat* OR participation OR adjust* OR adjustment* OR adapt* OR adaptation* OR integrate* OR integration OR belong* OR engagement OR engag* OR well-being OR wellbeing acceptance OR barrier*</td>
</tr>
</tbody>
</table>
## Table 2 Inclusion and exclusion criteria

<table>
<thead>
<tr>
<th>Population</th>
<th>Inclusion criteria</th>
<th>Exclusion criteria</th>
</tr>
</thead>
<tbody>
<tr>
<td>Refugees</td>
<td>Ages 6-18</td>
<td>If the intervention is mainly focused on immigrants or if immigrants and refugees are described as one homogenous group. If the intervention is only focused on children with PTSS symptoms.</td>
</tr>
<tr>
<td>Support</td>
<td>Formal and informal support services (e.g. interventions, programs, teacher practices or pedagogies) or changes in school organisation to meet student’s needs.</td>
<td></td>
</tr>
<tr>
<td>Goal</td>
<td>To remove the barriers towards learning and foster inclusion or participation at school, as well directly as indirectly (e.g. improving well-being, school climate, peer interaction etc.)</td>
<td></td>
</tr>
<tr>
<td>Setting</td>
<td>Regular schools or classes in OECD countries</td>
<td>Community based interventions Special education schools Separate special language classes Schools at asylum seeker camps or centres</td>
</tr>
<tr>
<td>Design</td>
<td>Empirical studies</td>
<td>Literature studies, reviews</td>
</tr>
<tr>
<td>Publication type</td>
<td>Journal articles or reports published between January 1994 - march 2016.</td>
<td>Books, other grey literature</td>
</tr>
<tr>
<td>Language</td>
<td>Dutch or English</td>
<td></td>
</tr>
</tbody>
</table>
Figure 2 Search procedure
### Table 3: Included articles

<table>
<thead>
<tr>
<th>First author and year of publication</th>
<th>Country</th>
<th>Intervention/ Support</th>
<th>Ecology Level$^a$</th>
<th>Measures</th>
<th>Outcomes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bačáková 2013</td>
<td>Czech Republic</td>
<td>Continued Professional Development seminar for school staff</td>
<td>Exo</td>
<td>Interviews with children, parents and teachers, direct observation at the schools, and document analysis</td>
<td>Schools undertook further CPD, obtained more funding and resources, improved support provision and grade placement.</td>
</tr>
<tr>
<td>Beirens, 2006</td>
<td>England</td>
<td>Children’s Fund education services</td>
<td>Micro, Meso, Exo</td>
<td>Interviews with service providers, stakeholders, agency representatives, school staff, parents and refugee children</td>
<td>Improved emotional and social well-being/skills, educational attainment, better home-school liaison, and community integration.</td>
</tr>
<tr>
<td>Block 2014</td>
<td>Australia</td>
<td>School’s Support Program</td>
<td>Exo</td>
<td>Interviews with stakeholders, partnership analysis tool, VicHealth checklist for partnership, action plan review data</td>
<td>Establishment of successful partnerships, structural within school changes, improved interaction with families, better support provision and understanding of refugee experiences.</td>
</tr>
<tr>
<td>Cameron 2006</td>
<td>England</td>
<td>Changing intergroup attitudes of peers through story reading</td>
<td>Micro</td>
<td>Interviews with children, Preschool Racial Attitude Measure-II, intended behaviour measure, subgroup identity measure, inclusion of IOS measure</td>
<td>More positive outgroup attitudes</td>
</tr>
<tr>
<td>Dooley 2009</td>
<td>Australia</td>
<td>Teaching strategies to help students acquire English and basic literacy skills alongside general school curriculum</td>
<td>Micro</td>
<td>Interviews with teachers, parents and students about language and literacy pedagogy</td>
<td>Teachers provide individual reading support, use genre teaching, scaffolding, draw on students’ interests, explore and build up concepts, and make links to prior knowledge.</td>
</tr>
</tbody>
</table>

$^a$Micro refers to the level closest to the child (e.g. teacher-child interactions), meso refers to interactions between the different micro levels (e.g. parent-teacher interactions), exo refers to the organizational level of the school and policies (e.g. partnerships between school and community organisations).
<table>
<thead>
<tr>
<th>First author and year of publication</th>
<th>Country</th>
<th>Intervention/Support</th>
<th>Ecology level(s)</th>
<th>Measures</th>
<th>Outcomes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dooley 2011</td>
<td>Australia</td>
<td>Parallel linguistics &amp; literacy support</td>
<td>Micro</td>
<td>Interviews with teachers, administrators, students and family adults</td>
<td>Teachers use basic literacy and genre-based teaching with high controlled instruction.</td>
</tr>
<tr>
<td>Ferfolja 2010</td>
<td>Australia</td>
<td>Homework support service (RAS)</td>
<td>Micro</td>
<td>Interviews with teachers, teacher completed questionnaire and ESL scales</td>
<td>Improved language skills and better prepared pre-service teachers</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>about academic performance</td>
<td></td>
</tr>
<tr>
<td>Fazel 2009</td>
<td>United Kingdom</td>
<td>School-based mental health service</td>
<td>Micro, Meso, Exo</td>
<td>Teacher completed SDQ</td>
<td>Refugee students show less hyperactivity, emotional symptoms and peer problems</td>
</tr>
<tr>
<td>Hardy 2013</td>
<td>Australia</td>
<td>School-community garden</td>
<td>Micro, Meso, Exo</td>
<td>Focus groups with students, classroom and student observations, interviews</td>
<td>Growth in refugee students’ self-esteem, well-being, engagement in learning, enhanced relationships</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>with school staff</td>
<td>with the community, enhanced teacher understanding</td>
</tr>
<tr>
<td>Hughes 2007</td>
<td>United Kingdom</td>
<td>Children’s Fund education services</td>
<td>Micro, Meso, Exo</td>
<td>Focus groups with school staff, observations, interviews with service</td>
<td>Schools provided language and emotional support, tried to engage and support families, and sought</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>providers, parents and refugee students, document analysis</td>
<td>to build the capacity of school staff. It was argued that significant financial resources and</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>specialist support are needed.</td>
</tr>
<tr>
<td>First author and year of publication</td>
<td>Country</td>
<td>Intervention/Support</td>
<td>Ecology level</td>
<td>Measures</td>
<td>Outcomes</td>
</tr>
<tr>
<td>--------------------------------------</td>
<td>---------</td>
<td>---------------------</td>
<td>---------------</td>
<td>----------</td>
<td>----------</td>
</tr>
<tr>
<td>Miller 2009</td>
<td>Australia</td>
<td>Science vocabulary project</td>
<td>Micro</td>
<td>Focus groups and interviews with teachers, student completed questionnaires, journals and textbook analysis</td>
<td>Additional science vocabulary learning materials appears to be useful.</td>
</tr>
<tr>
<td>Naidoo 2008</td>
<td>Australia</td>
<td>Homework support from pre-service teachers (RAS)</td>
<td>Micro</td>
<td>Interviews and focus groups with teachers and tutors, online discussion forum, observations in homework centres</td>
<td>Refugee students increased educational participation, improved literacy, motivation and self-esteem.</td>
</tr>
<tr>
<td>Nwosu 2014</td>
<td>USA</td>
<td>Multicultural teaching, curricula and programs</td>
<td>Micro, Meso, Exo</td>
<td>Interviews with service providers, document and curriculum analysis, classroom observations</td>
<td>Shaw academy promotes positive personal identity and appreciation for heterogeneity.</td>
</tr>
<tr>
<td>Pugh 2012</td>
<td>Australia</td>
<td>New Arrivals Program</td>
<td>Exo</td>
<td>Interviews with principal, assistant principal and teachers, school documents and material analysis, observations in the classroom, of staff meetings and inquiry groups</td>
<td>More inter-cultural interaction between students, more positive community attitudes, and smoother transition to mainstream school.</td>
</tr>
<tr>
<td>Rah 2013</td>
<td>United States</td>
<td>Family And Schools Together (FAST) after school program</td>
<td>Micro, Meso</td>
<td>Informal observations, interviews with families and school staff</td>
<td>Better relationships between parents and school personnel, high graduation rate, better parent-child relationships</td>
</tr>
</tbody>
</table>
Table 3 Included articles (continued)

<table>
<thead>
<tr>
<th>First author and year of publication</th>
<th>Country</th>
<th>Intervention/ Support</th>
<th>Ecology level</th>
<th>Measures</th>
<th>Outcomes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rousseau 2000</td>
<td>Canada</td>
<td>Creative expression project</td>
<td>Micro</td>
<td>Analysis of drawings and stories</td>
<td>Art project helped children process trauma and dislocation experiences</td>
</tr>
<tr>
<td>Sidhu 2009</td>
<td>Australia</td>
<td>Partnerships between schools and community organizations</td>
<td>Exo</td>
<td>Interviews with community service providers and stakeholders</td>
<td>Partnerships are formed to support teachers and students but adequate resource provision is necessary to sustain effective relationships.</td>
</tr>
<tr>
<td>Taylor 2012</td>
<td>Australia</td>
<td>Priority Schools Program, New Arrivals Program, ESL Strategic Plan</td>
<td>Exo</td>
<td>Interviews with principals and support staff</td>
<td>Schools address barriers with a targeted policy and system support, by working with other agencies, commit to social justice, and taking an inclusive, holistic approach to education.</td>
</tr>
<tr>
<td>Weekes 2011</td>
<td>Australia</td>
<td>Homework support from adults (mainly retired teachers)</td>
<td>Micro</td>
<td>Interviews with teachers, tutors, other key stakeholders and students, teacher- and volunteer-completed surveys</td>
<td>Improved refugee students’ participation in class, social skills, confidence and self-esteem, and better (homework) task performance</td>
</tr>
</tbody>
</table>
## Appendix E

Table 3 Addressed barriers

<table>
<thead>
<tr>
<th>First author and year of publication</th>
<th>Access barriers</th>
<th>Opportunity barriers</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Emotional support</td>
<td>Cultural integration support</td>
</tr>
<tr>
<td>Bačáková 2013</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Beirens 2006</td>
<td>x</td>
<td>x</td>
</tr>
<tr>
<td>Block 2014</td>
<td>x</td>
<td>x</td>
</tr>
<tr>
<td>Cameron 2006</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dooley 2009</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dooley 2011</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fazel 2009</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Ferfolja 2010</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hardy 2013</td>
<td>x</td>
<td>x</td>
</tr>
<tr>
<td>Hughes 2007</td>
<td>x</td>
<td>x</td>
</tr>
<tr>
<td>Miller 2009</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Naidoo 2008</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Nwosu 2014</td>
<td>x</td>
<td>X</td>
</tr>
<tr>
<td>Pugh 2012</td>
<td>x</td>
<td>x</td>
</tr>
<tr>
<td>Rah 2013</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rousseau 2000</td>
<td>X</td>
<td>x</td>
</tr>
<tr>
<td>Sidhu 2009</td>
<td>x</td>
<td>x</td>
</tr>
<tr>
<td>Taylor 2012</td>
<td>x</td>
<td>x</td>
</tr>
<tr>
<td>Weekes 2011</td>
<td>x</td>
<td>x</td>
</tr>
</tbody>
</table>

*Notes. X = main focus x = indirect focus*
Appendix F

Table 4 Research levels of evidence for quantitative studies, adopted from Hennessy (2006).

<table>
<thead>
<tr>
<th>Level</th>
<th>Study type</th>
</tr>
</thead>
<tbody>
<tr>
<td>I</td>
<td>Meta-analyses/expert panel reviews of research evidence</td>
</tr>
<tr>
<td>II</td>
<td>replicated randomized control trials or quasi-experimental designs</td>
</tr>
<tr>
<td>III</td>
<td>single randomized control trial</td>
</tr>
<tr>
<td>IV</td>
<td>single quasi-experiment</td>
</tr>
<tr>
<td>V</td>
<td>single group pre- or post-test designs</td>
</tr>
<tr>
<td>VI</td>
<td>pilot studies/case studies/ observation</td>
</tr>
</tbody>
</table>

Table 5 Research levels of evidence for qualitative studies, adopted from Daly (2007).

<table>
<thead>
<tr>
<th>Study type</th>
<th>Level</th>
<th>Features</th>
</tr>
</thead>
<tbody>
<tr>
<td>Generalizable studies</td>
<td>I</td>
<td>Sampling focused by theory and the literature, extended as a result of analysis to capture diversity of experience. Analytic procedures comprehensive and clear. Located in the literature to assess relevance to other settings.</td>
</tr>
<tr>
<td>Conceptual studies</td>
<td>II</td>
<td>Theoretical concepts guide sample selection, based on analysis of literature. May be limited to one group about which little is known or a number of important subgroups. Conceptual analysis recognizes diversity in participants’ views.</td>
</tr>
<tr>
<td>Descriptive studies</td>
<td>III</td>
<td>Sample selected to illustrate practical rather than theoretical issues. Record a range of illustrative quotes including themes from the accounts of “many,” “most,” or “some” study participants.</td>
</tr>
<tr>
<td>Single case study</td>
<td>IV</td>
<td>Provides rich data on the views or experiences of one person or school. Can provide insights in unexplored contexts.</td>
</tr>
</tbody>
</table>
### Appendix G

Table 6 Quality assessment qualitative studies

<table>
<thead>
<tr>
<th>First author and year</th>
<th>Level of evidence</th>
<th>Questions checklist</th>
<th>Quality score</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>III</td>
<td>1 2 3 4 5 6 7 8 9</td>
<td></td>
</tr>
<tr>
<td>Bačáková 2013</td>
<td>Yes No No No No No</td>
<td>Can’t tell Yes</td>
<td>L</td>
</tr>
<tr>
<td>Beirens 2006</td>
<td>Yes No No No No No</td>
<td>No Yes</td>
<td>L</td>
</tr>
<tr>
<td>Dooley 2009</td>
<td>No No No No No No</td>
<td>No No No</td>
<td>L</td>
</tr>
<tr>
<td>Dooley 2011</td>
<td>Yes No No No No No</td>
<td>No No No</td>
<td>L</td>
</tr>
<tr>
<td>Hardy 2013</td>
<td>No Yes No No No No</td>
<td>Can’t tell No</td>
<td>L</td>
</tr>
<tr>
<td>Hughes 2007</td>
<td>No No No No No No</td>
<td>No No No</td>
<td>L</td>
</tr>
<tr>
<td>Naidoo 2008</td>
<td>Yes Yes Yes No No</td>
<td>Yes No No</td>
<td>M</td>
</tr>
<tr>
<td>Nwosu 2014</td>
<td>Yes No No No No No</td>
<td>No No No</td>
<td>L</td>
</tr>
<tr>
<td>Pugh 2012</td>
<td>Yes No No No No No</td>
<td>No No No</td>
<td>L</td>
</tr>
<tr>
<td>Rah 2013</td>
<td>No No No No No No</td>
<td>No No No</td>
<td>L</td>
</tr>
<tr>
<td>Rousseau 2000</td>
<td>No No No No No No</td>
<td>No No No</td>
<td>L</td>
</tr>
<tr>
<td>Sidhu 2009</td>
<td>Yes No No No No No</td>
<td>No No No</td>
<td>L</td>
</tr>
<tr>
<td>Taylor 2012</td>
<td>No No No No No No</td>
<td>No No No</td>
<td>L</td>
</tr>
<tr>
<td>Weekes 2011</td>
<td>Yes No No Yes Yes Yes Yes Yes</td>
<td></td>
<td>M</td>
</tr>
</tbody>
</table>

**Notes.**  
*See Appendix F table 5 for a description of the research levels of evidence.  
See Appendix H for the quality assessment checklist, adopted from CASP (2013). If a majority of the answers to the questions was yes (>60%), it was decided to fulfil the requirements.  
Sum of ‘yes’ answers: 0-3 = low quality (L), 4-6 = medium quality (M), 7-9 = high quality (H).*
### Table 7 Quality assessment quantitative controlled trials

<table>
<thead>
<tr>
<th>First author and year</th>
<th>Level of evidence</th>
<th>Questions checklist</th>
<th>Quality score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cameron 2006</td>
<td>III</td>
<td>0 2 1 2 1 0 1 2 2</td>
<td>M</td>
</tr>
<tr>
<td>Fazel 2009</td>
<td>IV</td>
<td>0 1 0 1 2 1 2 2 2</td>
<td>M</td>
</tr>
</tbody>
</table>

Notes: * See Appendix F table 4 for a description of the research levels of evidence. † See Appendix H for the quality assessment checklist, adopted from EPHPP (1998). 0 = weak, 1 = moderate, 2 = strong. ‡ Sum of answers: 0-5 = low quality (L), 6-11 = medium quality (M), 12-16 = high quality (H).

### Table 8 Quality assessment mixed method studies

<table>
<thead>
<tr>
<th>First author and year</th>
<th>Level of evidence</th>
<th>Questions qualitative checklist</th>
<th>Quality score</th>
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<tbody>
<tr>
<td>Block 2014</td>
<td>III</td>
<td>Yes Yes No No No Yes Yes Yes</td>
<td>M</td>
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<tr>
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<td>III</td>
<td>Yes Yes No Yes No No Yes No No</td>
<td>M</td>
</tr>
<tr>
<td>Miller 2009</td>
<td>III</td>
<td>Yes No Yes Can’t tell No No Yes Yes Yes</td>
<td>M</td>
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</table>

<table>
<thead>
<tr>
<th>First author and year</th>
<th>Level of evidence</th>
<th>Questions quantitative and mixed-method checklist</th>
<th>Quality score</th>
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</thead>
<tbody>
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<td>Block 2014</td>
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<td>Yes No Can’t tell Yes Yes No No</td>
<td>L</td>
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<tr>
<td>Ferfolja 2010</td>
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<td>No No Can’t tell Yes No No No</td>
<td>L</td>
</tr>
<tr>
<td>Miller 2009</td>
<td>V</td>
<td>Yes No Yes Yes Yes No No</td>
<td>M</td>
</tr>
</tbody>
</table>

Notes: * See Appendix F table 5 for a description of the research levels of evidence for qualitative studies. † See Appendix F table 4 for a description of the research levels of evidence for quantitative studies. ‡ See Appendix H for the quality assessment checklist, adopted from CASP (2013). †† See Appendix H for the quality assessment checklist, adopted from Pluye et al. (2011). If a majority of the answers to the questions was yes (>60%), it was decided to fulfil the requirements. ‡‡ Sum of ‘yes’ answers: 0-3 = low quality (L), 4-6 = medium quality (M), 7-9 = high quality (H). ‡§ Sum of ‘yes’ answers: 0-2 = low quality (L), 3-5 = medium quality (M), 6-7 = high quality (H).
Appendix H

Quality assessment tool for qualitative studies developed by CASP (2013)

1. Was there a clear statement of the aim, purpose or goal of the research?
   a. Is the goal of the research clearly stated?
   b. Why it was thought important?
   c. Its relevance

2. Was the research design appropriate to address the aims of the research?
   a. If the researcher has justified the research design (e.g. have they discussed how they decided which method to use)?
   b. In case of a qualitative methodology: does the research seeks to interpret or illuminate the actions and/or subjective experiences of research participants?

3. Was the recruitment strategy appropriate to the aims of the research?
   a. If the researcher has explained how the participants were selected
   b. If they explained why the participants they selected were the most appropriate to provide access to the type of knowledge sought by the study
   c. If there are any discussions around recruitment (e.g. why some people chose not to take part)

4. Was the data collected in a way that addressed the research issue?
   a. If the setting for data collection was justified
   b. If it is clear how data were collected (e.g. focus group, semi-structured interview etc.)
   c. If the researcher has justified the methods chosen
   d. If the researcher has made the methods explicit (e.g. for interview method, is there an indication of how interviews were conducted, or did they use a topic guide)?
   e. If methods were modified during the study. If so, has the researcher explained how and why?
   f. If the form of data is clear (e.g. tape recordings, video material, notes etc.)
   g. If the researcher has discussed saturation of data

5. Has the relationship between researcher and participants been adequately considered?
   a. If the researcher critically examined their own role, potential bias and influence during
      i. Formulation of the research questions
ii. Data collection, including sample recruitment and choice of location

b. How the research responded to events during the study and whether they considered the implications of any changes in the research design

6. Have ethical issues been taken into consideration?
   a. If there are sufficient details of how the research was explained to participants for the reader to assess whether ethical standards were maintained
   b. If the researcher has discussed issues raised by the study (e.g. issues around informed consent or confidentiality or how they have handled the effects of the study on the participants during and after the study)
   c. If approval has been sought from the ethics committee

7. Was the data analysis sufficiently rigorous?
   a. If there is an in-depth description of the analysis process
   b. If thematic analysis is used. If so, is it clear how the categories/themes were derived from the data?
   c. Whether the researcher explains how the data presented were selected from the original sample to demonstrate the analysis process
   d. If sufficient data are presented to support the findings
   e. To what extent contradictory data are taken into account
   f. Whether the researcher critically examined their own role, potential bias and influence during analysis and selection of data for presentation

8. Is there a clear statement of findings?
   a. If the findings are explicit
   b. If there is adequate discussion of the evidence both for and against the researchers’ arguments
   c. If the researcher has discussed the credibility of their findings (e.g. triangulation, respondent validation, more than one analyst)
   d. If the findings are discussed in relation to the original research question

9. How valuable is the research?
   a. If the researcher discusses the contribution the study makes to existing knowledge or understanding e.g. do they consider the findings in relation to current practice or policy, or relevant research-based literature?
   b. If they identify new areas where research is necessary
   c. If the researchers have discussed whether or how the findings can be transferred to other populations or considered other ways the research may be used
Quality assessment tool for quantitative studies, developed by EPHPP (1998)

1. Selection bias
   a. Are the individual selected to participate in the study likely to be representative of the target population?
   b. Did the majority of the selected individuals agree to participate?

2. Study design
   a. Was the study described as randomized?
   b. If yes, was the method of randomization described?
   c. If yes, was the method appropriate?

3. Confounders
   a. Were there important differences between groups prior to the intervention (e.g. in race, sex, age, SES, education, health status, score on outcome measure)?
   b. Was there controlled for relevant confounders?

4. Blinding
   a. Were the outcome assessors aware of the intervention or exposure status of participants?
   b. Were the study participants aware of the research question?

5. Data collection methods
   a. Were data collection tools shown to be valid?
   b. Were data collection tools shown to be reliable?

6. Withdrawals and drop-outs
   a. Were withdrawals and drop-outs reported in terms of numbers and/or reasons per group?
   b. Did the majority of participants complete the study?

7. Intervention integrity
   a. Did the majority of participants receive the allocated intervention or exposure of interest?
   b. Was the consistency of the intervention measured?
   c. Is it likely that subjects received an unintended intervention that may influence the results?

8. Analysis
   a. Are the statistical methods appropriate for the study design?
b. Is the analysis performed by intervention allocation status (i.e. intention to treat) rather than the actual intervention received?

Additional questions quality assessment for descriptive mixed method studies, adopted from Pluye et al. (2011)

1. Is the sampling strategy relevant to address the quantitative research question?
   a. Is the source of the sample relevant to the population under study?
   b. When appropriate, there is a standard procedure for sampling, and the sample size is justified

2. Is the sample representative of the population understudy?
   a. Inclusion and exclusion criteria are explained
   b. Reasons are given why certain eligible individuals chose not to participate

3. Are measurements appropriate (clear origin, or validity known, or standard instrument)?
   a. The variables are clearly defined and accurately measured
   b. Measurements are justified and appropriate for answering the research question
   c. The measurements reflect what they are supposed to measure

4. Is there an acceptable response rate of 60% or above (not pertinent for case series and case report)?

5. Is the mixed methods research design relevant to address the qualitative and quantitative research questions (or objectives), or the qualitative and quantitative aspects of the mixed methods question (or objective)? E.g., the rationale for integrating qualitative and quantitative methods to answer the research question is explained.

6. Is the integration of qualitative and quantitative data (or results) relevant to address the research question (objective)? E.g., there is evidence that data gathered by both research methods was brought together to form a complete picture, and answer the research question; authors explain when integration occurred (during the data collection-analysis or/and during the interpretation of qualitative and quantitative results); they explain how integration occurred and who participated in this integration.

7. Is appropriate consideration given to the limitations associated with this integration, e.g., the divergence of qualitative and quantitative data (or results) in a triangulation design?