

Public services as indispensable stepping stones to migrant women's self determination

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Abstract

This paper argues that publicly funded infrastructure, or the welfare state, were indispensable in enabling a group of migrant women to exercise energetic self determination during resettlement in Melbourne between the mid 1970s to late 1990s. Even though the group of participants in my doctoral study were extraordinarily resilient, and mostly educated women, they needed the service system developed within the bi-partisan supported policy of multiculturalism which granted access to newcomers on the basis of citizenship rights. The paper unpacks the sufferings of migrants who come from communally based societies, lose their former worlds and meaningful place in society and encounter negative representations fuelled by ignorance in the Australian context. I then present the women's detailed evidence about how the network of publicly funded services, as they existed up to the end of the 1990s in Victoria, enabled them to not only recapture their former energies, but also had life affirming reverberations for their families and the community. In contradiction to recent divisive, neo-liberal public discourses (Edgar 2001; Mendes 2003), the welfare state and the policies of multiculturalism and related programs enabled engaged citizenship and the building of vibrant and diverse civil society. Rather than being a drain on the public purse, modest government investments into programs enabled the nation to benefit from the women's enormous industriousness. After some brief contextual information, I will present vignettes from their narratives about connecting with a variety of services. The tragically amusing dialogue with an isolated woman's experience of poor medical practice will provide a counter balance to the discussion.

Keywords: *Welfare state; Public and community services; Multicultural services; Self determination; Women's agency; Migrant women; Diversity*

Introduction

This paper argues that publicly funded infrastructure, or the welfare state, were indispensable in enabling a group of migrant women to exercise energetic self determination during resettlement in Melbourne. The policy of multiculturalism became devalued in the legitimisation of overt expressions of racism dating from the election of the Howard Government and its tacit support for Pauline Hanson's analysis of the ills of our society (MacCallum 2002). Within the umbrella of multiculturalism, migrants could access a complex variety of supports on the basis of citizenship rights, hence on a non-stigmatised basis. I will present evidence from my PhD study in the form of vignettes from the women's narratives, where they revealed details about the role of such services. The welfare state was legitimised after 150 years of human rights abuses in laissez-faire capitalist economies and through calamities such as the Great Depression and the two World Wars (Beveridge 1944;

Chiefly 1944; Castles 1985; Mc Mahon et al 2000). The Australian model of embracing cultural diversity by dedicating resources to programs supporting migrant resettlement was seen as investing in the nation's multi-dimensional wealth, and was backed by voluminous research (Castles et al 1990; Cope 1992). This legacy has been subject to repeated strokes of national amnesia in Australia and today, public discourses are largely couched within the mantra of 'welfare dependency', with a corresponding re-framing of multiculturalism as detracting from a pure Australian identity (MacCallum 2002). My PhD study corroborates that the combination of federal, state and local government policies and funded programs built systematically on the evidence of need, provided a web of supports which women could access for a period, deriving unexpected benefits with long term, life affirming impacts for all involved. Note that from the end of World War II until today, Australian infrastructure has been funded in terms which are niggardly in comparison with investments by comparable nation states (Esping-Andersen 2002; Castles 2004). The majority of the women were from the upper levels of their societies, with their level of privilege corresponding to similar echelons in Australia. I found that even such women needed the welfare state's stepping stones. The lack of services, or adverse contacts, lead frightened newcomers to retreat to the privacy of their homes, locking them for years in pointless treadmills, an experience illustrated by the last vignette of the paper.

Over my personal and professional life, I had witnessed at close range the ingenuity and creative energies with which migrant women re-created life for themselves and their families. Through networks, I gained access to a group of women from five world regions, namely: Vietnam, the Philippines, the former Soviet Union, the Horn of Africa and Lebanon. I ensured that a variety of ages, education and class backgrounds were represented amongst the six women from each region. Clearly, my sample is not representative, not least because I spoke to women who were known to a welfare worker from their community and with whom they had maintained a positive relationship. The women arrived in Australia after the policy of multiculturalism had been adopted and a sound welfare service infrastructure was in place. The earliest arrivals were some of the Lebanese who came either to find a more prosperous life, or were brought back as spouses to Australian Lebanese men. Most of the Vietnamese women escaped the new Communist regime and were the first boat people, who were promptly processed and released into the community. Filipinas were mostly tertiary educated and came for a range of reasons, including escaping jailing as political dissidents during the dictatorship of Marcos, and coming as married couples to build a life free from the spectre of absolute poverty, two of the women had married Australian men. All the Russians arrived as families after the collapse of the Soviet Union and were highly qualified. The African women, three Eritreans, one Ethiopian and one South Sudanese came from the elite ranks of their societies, except for a South Sudanese grandmother who had no formal education. Almost all of this group came from family and community backgrounds of great symbolic, cultural and social capital, even if some had little formal education, and more than half the group had enjoyed material wealth. They showed strong resilience as defined by overcoming extreme adversity (Deveson 2003; Nguyen 2005).

The theoretical underpinning of my exploration of migrant women's capacity to act, or agency, came from feminist, cross cultural and social theory (Schutz 1972;

Bourdieu 1977; Giddens 1984, 1991; Spivak 1987; Kandiyoti 1999; hooks 2000). Broadly understood, theory on agency refers to people's socialisation into personhood through the daily affirmations of members of one's lifeworld, on the basis of knowledge and wisdom emanating from living on a parcel of land throughout history. Hence there are diverse, continually contested and shifting meanings attached to gender, what is worth pursuing in life and how time ought to be spent. Hartley (1995) documents the variety of meanings imbued into the words, 'neighbour', 'husband', 'love', 'family' and 'relationships' prevalent in diverse, non-English speaking cultures of Australia.

The challenges of migration

In order to understand how services might be useful or not, I present an overview of the women's stories about the constitution of their suffering during resettlement. They all came from communally based societies and for them normal life signifies daily contact with many people, usually on a continual basis. This section outlines the chief seven problematics of migration.

Being in foreign spaces

Even for the 'most' European group, the Russians, daily routines occur in group activities in highly structured spaces. Individualism was not a central value and traditional hierarchical relationships of respect prevailed. They all came from spaces teeming with people, whether the cities of the Former Soviet Union, of Asia and Africa. A primary orientation to family life was distinct from the Australian or modernist notion of the family of origin as a launching pad into the wider world of careers and public life (Goodnow & Cashmore 1985:235). Emerging literature on social geography (Hillier and Rooksby 2002; Mels 2004), provide useful theoretical explorations of diasporic existence and agency, such as questions of belonging, home, strangeness and strategies for self expression and survival. For the women, the empty spaces of urban Australia intensify the *stranger* experience (Schutz 1972), as much tacit knowledge about personhood and life meets with jarringly dissonant responses. Nevertheless, the new spaces were blissfully *safe* for the refugees and the material affluence was enjoyable, at least during the honeymoon period.

Loss of home

Some women continued to grieve at losing their homelands (Bao and Cahill 2001:737; Nguyen 2005):

[long silence as Anastasia fight back tears, then with a singsong tone]

We had a good life, you could go to the museum, to children's plays, there were lots of interesting things going on all the time you could go to with your children and here everything is so expensive. The schooling system was better because it was from 8.00 to 1.00 and it gave kids the time to play, do their homework and then go to hobbies, like music and dancing, available very cheap in walking distance.

Loss of familiar ways of being

Migrants do not know of the articles of faith, the myths, the histories and a-priori assumptions that define a lifestyle as self-evident truths and that hold: 'the

rationalisations and institutionalisations of the world together, other gods reveal codes of morality, of the good life, of the sacred, other propositions of the right and of nature' (Schutz 1970:85). A culture's schemata of interpreting the world coincides with prescriptions of how people connect with each other (Sloan 1996). For all of the countries in the study neighbours were included in daily life rituals of affection and care extended to kin.

Struggles in the public sphere: blocks to resumption of former occupations

Eritrean Zeinab cried for three months, angry that eminent Eritreans have to do 'rubbish jobs'. A Vietnamese dentist who provided the resources for all the members of her extended family to escape by boat over a fifteen year period, while occupying a senior post in a hospital, operating a private practice at home, treating the poor gratis and using her international networks to procure medical supplies:

I see my family, but what about my job, what about my life? also English [...] here very terrible, nobody can understand my English.

The men's experiences

Parents feel ashamed as they experience role reversal when having to resort to the assistance of their children who adapt more quickly (Deen 1995: 23). A particular dilemma for migrant men who are also deprived of the community life which operated as a mediating layer for the resolution of life and relationship issues. Now located in individualised spaces, their frustrations are usually expressed at home.

Immobilisation

The compounding effect of language, lack of money and transport create an immobilisation which, in itself, was named as the most debilitating aspect of the women's sense of dignity as competent agents. All the women in the study reported a period of up to two years of depression, which became prolonged clinical illness for a minority.

Loss of identity and negative representations

The frequency with which interpersonal encounters now include negative representations of their identity and culture is a chief problematic of settlement for many. Australian multiculturalism research documented the shallowness of tolerance' as indicated by the absence of immigrants in decision making positions and the mono-cultural basis of the Australian Constitution, political and legal institutions (Kalantzis 1989; Castles et al 1990; Vasta 1993; Castles 1995). Groups of migrants take turns at being targets in what Povinelli (2002) conceptualises as abhorrent alterity. The research interviews reported here occurred prior to the 'war on terror', a time when the 2005 Cronulla race riots were inconceivable in Australia (HREOC 2003; Poynting 2004). Teresa, who came from a famous upper class family of political dissidents during the Marcos regime says that she was treated in a much nicer way in the Philippines, where she would be often greeted in the street by former students including Senators, professors and company directors. Suddenly in Australia she was confronted by the thought that she might not be the person she – and others – thought she was. She illustrated her resistance to attempts at reconstituting her identity by describing her struggle with hospital nurses who tried to prevent her taking her new born baby to bed:

So I told them that I always had my 4 other children in bed, one until he was 10, and all of them are quite alive...

Challenges of migration

Mouffe theorises the incommensurability of cultural diversity by pointing out that social processes and institutions governing societies are constituted not only by specific forms of identity and values, but are also the expression of sedimentations of judgements about the forms of life a society has accepted over time (Mouffe 2002: 94). Quoting Wittgenstein, who first showed that there is no objective truth outside of language: 'So you are saying that human agreement decides what is true and what is false. It is what human beings say that is true or false; and they agree in the language they use. That is not agreement in opinions but in forms of life' (Wittgenstein 1958: 242 in Mouffe 2002: 96).

Most of the women went through a year or two of depression after arrival but five became clinically ill through a combination of being deprived of their previous sources of sustenance, experiencing personal tragedies and being forced into situations which were inherently debilitating, such as abusive marriages. For all of them, isolation was the common breeding ground for despair and psychiatric illness. Mouffe's (2002: 97) analysis of nihilism could apply to clinical depression:

It indicates a failure of meaning that draws into question the very possibility of a goal-directed, meaningful action. Individuals become nihilistic when they are unable to constitute their social relations and identity in order to form a will to act

The interpretive practices Mouffe (2002) refers to as important in the will to act depended on the African, Filipino, Russian, Lebanese and, to a lesser extent, Vietnamese women's groundings in a dense web of daily and affirming intimacies in a community context.

Facilitating processes: Australian publicly funded infrastructure

In the light of the difficulties of migration, the move to Australia could have been felt by the women and their families to have been an unmitigated error. The women's stories do provide evidence of the indispensability of public infrastructure in enabling them to recapture the life energies which had been eroded or buried by a variety of global, national and personal disasters. These stepping stones were characterised by their availability on a non-stigmatised basis, as part of Australian social citizenship rights granted to all newcomers as part of the overarching paradigm of the policy of multiculturalism (Turner 1993: 1–18; Salvaris 1995).

The provision of income benefits to migrants prior to the introduction of the two-year waiting time for those who are not refugees or humanitarian entrants, was named by the women as the primary facilitator of a civilised life, preventing breakdown (Australian Parliament 1998). Instead of encouraging dependency, government income benefits enabled them to work at a furious pace, as expressed by Karina:

K: Without income support we wouldn't have survived. Well, it was very hard because there was not one free minute. I learnt English till 2.00 in the morning; Sergei was 10 and went to school. My daughter spoke English already.

O: It must have been lonely.

K: Did not have time to feel lonely. We immediately started working.

The benefits of the free 510 hours of English Australian Migrant Education Program (AMEP) included having feelings of vulnerability validated and normalised by committed teachers and fellow students. This initial free service gave women an experience of the alien life-world as a benevolent one, countering fearful or distorted assumptions and interpretations, encouraging more forays into the wider community. Students were usually surprised at the generosity of the teachers and allied staff and volunteers who at times crossed professional boundaries and became family friends. The classes were sites for entry into Melbourne civil society, as friendships ensued not only within, but also across ethnicities.

The public health system was critical also in preventing personality and family disintegration. An Eritrean woman who had lived all of her life in precarious locations in African nations, gave birth to a sixteen week premature baby, weighing four hundred grams. The baby's amazing growth into a four kilogram baby six months after the interview was seen and felt by Naima as an affirmation by Allah of the transcendent value of her life of suffering, integrity, faith and love for humanity. Were such universal hospital services only available on a user-pays basis, the birth and death of a pre-mature child would have cast a negative pall over the entire extended family, with disastrous impact on her aplomb and self-determination. Instead, this crisis led to joy and a strengthening of this young woman's lifelong dedication to community service. Similarly, Teresa's previously privileged family was enabled to survive psychologically and emotionally due to Victoria's free educational services for her hearing impaired son, the universal public health and Transport Accident Commission resources when another son acquired permanent brain injury in a car accident and during her husband's two strokes. She marvels at the civility underpinning such government and taxpayer-funded infrastructure, which she names as the foundation for her sense of belonging and loyalty to Australia.

Accessible tertiary educational institutions, such as TAFE and, less frequently, university, were powerful sources of affirmation. Study opened doors to economic independence and meaningful participation in society. Most of the latest waves of arrivals, namely the Africans and Russians, were able to enrol in tertiary education. Only Larissa, as the spouse of an eminent scientist, did not qualify for access to any citizenship based resources. According to conditions for entry to Australia through a visa for eminent professionals, (assumed to be affluent), services were only available on a full fee basis and hence she was unable to reach first base by learning English. A fiercely intelligent musician, she remained alienated from the broader society, in contrast to the other women in the study. The low cost, geographical availability and broad range of vocational offerings at Victoria's system of technical colleges (TAFE) enabled career changes for those who were blocked by the discriminatory practices of professional bodies. This signalled the resumption of dignity in line with familial

cultural capital and also enabled families' active citizenship, in various spheres enriching Melbourne's social fabric. Affordability, again did not encourage complacency as the women worked at a furious pace, atypical of many Australian born students in my personal experience

Government policies

Federal government immigration policies prior to the significant retreat during 1996–1997 from bi-partisan support of multiculturalism directly impacted on the life chances of families. A Vietnamese grandmother:

When I came here, I had no way to make a living and when I came here, the Australian government and people were very good to me and even supported me with my necessities, so I felt I was in heaven... the government here respects human rights and is very caring.

Australia's vibrant Vietnamese business and cultural precincts were built centrally on policies of the eighties and nineties of accepting boat people and offering them a modicum of initial support, in contrast to the disaster of forcible detention awaiting today's boat people. This point illustrates that personal resilience needs to be complemented by structural and collective supports, lest the former be overwhelmed by life's contingencies (Deveson 2003). The African, Lebanese, and Vietnamese women's basic sense of wellbeing correlated strongly with past Federal liberal family reunion policy, unlike the Russians who, unable to sponsor other family members, live with a sense of hollowness and expressed the least sense of belonging and identification with Australia.

Intersecting supports

The existence of a diversity of services at multiple sites at grass roots neighbourhood, local government and regional levels operated as a web of synchronous stepping stones, which women could use according to need and at times for benefits which were not part of formal organisational goals. An ethno-specific Lebanese community development worker ran women's groups at the local neighbourhood house, facilitating the reversal of many oppressive domestic situations, with mothers' increased resilience resonating in their children's development. I heard similar narratives about the effectiveness of Maternal and Child Health nurses, local government employees, social workers, and other community services staff whose efforts are not often publicly endorsed. Their skill level was crucial and represented for Linda the beginning of a sense of belonging as an Australian Filipina:

[E]specially that I probably had and subconsciously have this feeling that you know, I'm not an Asian, I'm a Filipino, this person is a professional Australian, fair-headed person, and they really treat me ... they treat me like a person, and I like it. I like it. They don't care whether ... they don't care what my race is, and they were so genuinely interested about my life and genuinely enjoyed helping me.

All the African and Vietnamese women relied for some time on public housing. The much maligned high-rise estates are the fulcrum of lively, supportive communities for these refugees, in spite of the dysfunctional effects of some other tenants' substance abuse and criminality and, indeed, the often poor amenities available in those estates.

It is worth noting also that almost all the women in the study relied upon ethno-specific services of various kinds, including the wealthiest English speakers. Only Larissa, whose ineligibility for services as the spouse of the eminent academic, is absent from this list. It was noted above that her state of mind remained very alienated. My argument is illustrated particularly saliently through the story of another participant, Esther's. The life-giving reverberations of South Sudanese Esther's growth are of inestimable social, cultural and economic value with likely positive implications for the next few generations. South Sudanese refugee children and young people who have never been to a school at all exhibit unruly behaviours viewed with alarm by teachers and professionals eager to apply clinical labels of dysfunction (Centre for Multicultural Youth Issues 2003). The liaison and community education roles of ethno-specific professionals like Esther are a most effective method for enabling the integration of communities and avoiding such stark problems as the predominance of some groups of youth of culturally and linguistically diverse (CALD) backgrounds in the correctional system. Government investment into the one place Esther occupied in the Australian Migrant English Program (AMEP) free 510 hours of tuition to almost all categories of migrants, has translated into a positive cost-benefit ratio far beyond the norms of accounting.

Australian citizens

In contrast to the deference developed by most migrant women through prolonged experiences of marginalisation, the politically active and educated Horn of Africa women were able to resume their normal means of self expression as intellectual and moral leaders. All of the women who, at the time of interviews, enacted their citizenship by transforming negative Australian cultural spaces by befriending their detractors and in the process decreasing racist assumptions, educating had participated in the affordable university or TAFE systems. In contrast, the geographically isolated, equally educated and politically committed Teresa, spent many years in depression prior to finding fellow Filipina activists. She named her involvement in this advocacy group as her chief source of fulfilment, despite ongoing family tragedies. She now plays a key role in the local public school and other neighbourhood activities.

Women used a number of ingenious strategies for dealing with workplace discrimination and in the process contribute to building trust and civility at the community level. Linda, an ebullient and loving extrovert in the Philippines, suffered a precipitous decline into clinical depression due to profound emotional deprivation in the isolation of her husband's home in Melbourne's suburban expanses. Having benefited from years of free local government health and family counselling support (prior to the tendering out of such services on a commercial basis by the Kennett government), Linda initiated her re-entry into the labour market by finding now defunct employment training programs: 'they held my hand as long as I needed it'. In her first job in a large corporation she was subject to racist taunts and bullying, with remarks about table-top dancing. Linda rationalised that people are victims of media distortions and as the only Asian person in a large workforce, she needed to take responsibility for the process of breaking down stereotypes. She implemented a range of strategies including not keeping grudges and projecting a persona of integrity, even in the face of unjust treatment. When her co-workers accidentally read her Curriculum Vitae, which identified her journalism university studies and roles, they realised their error and she ended up having 'a really good time there'.

Linda recuperated her former competence as an agent, but with greatly enriched skills in dealing with people and a deepened generosity which was already outstanding according to Filipino standards. She exemplifies, as do most of the other women in the study, the creation of life from the Third Spaces according to trans-national feminists (Narayan and Harding 2004) and the transcending of Western binaries such as us-them, black-white, East-West, (Minh-ha 1989; Plumwood 2002). Linda expresses awareness of the self-reinforcing dynamism of racism and of relationship-building by saying that she has a more positive identity than most Filipinas who expect to be treated badly. She urges other Filipinas to open up to Australians. Many of the women who felt positively settled were drawing on their cultural backgrounds to build community capacity, a new goal for Australian governments, but a way of being for people from the world regions represented in the study.

Impact of poor or non-existent professionals services

The absence of useful or quality supports left some women in pointless treadmills or actually blocked the attainment of what they needed; a lack of skills amongst professionals to address the barriers faced by migrants was the key factor. Mifsud came from a nominal Muslim family leading a modern European lifestyle. When her husband and parents died suddenly, she needed to join her only sibling in Melbourne and then to marry precipitously to remain. Isolated and not knowing English, her strict, older, religious husband restricted every aspect of her life, contributing to psychiatric illness. She described her hospitalisation during an acute episode:

O: Did they understand that the way he was treating you was making you sick?

M: 100%.

O: But they didn't talk to him?

M: I did not explain much because it is my personal life. You look bad if something is not going well in your life, it makes you look bad.

O: Did they connect you to the Lebanese community or anything?

M: The interpreter told me about services but I didn't go because I could not go, I was too sick.

O: So what did you do during the day? Did you listen to Lebanese radio?

M: 24 hours.

O: Is it important to you?

M: I feel like I'm in Lebanon.

O: How would it be without radio?

M: I feel happy when I listen.

O: Did you have any contact with the Australian world, anybody, shops?

M: No, only Arabic people because I could not speak English.

O: Did you see anybody else apart from your husband?

M: My sister came for half an hour, that's it. My girlfriend came too. Later I saw a psychiatrist.

O: Did the specialist help you?

M: My husband went with me and he told him everything. I don't know what he said.

O: Was there any interpreter?

M: My husband was interpreting.

O & Interpreter: Shocking, shocking! [We all laughed]

M: The specialist told my husband that I was physically OK, it's just my mind.

O & Interpreter: Shocking, shocking! [More laughter]

She started going to an Arabic doctor by herself and said that she would go and cry, cry, cry. The doctor would check her and say 'There is nothing wrong with you'; but she would go again and cry, so he asked her, 'Why are you upset?'

O: Didn't you tell him why you were upset?

M: I told him, but he knows my husband, so he told me I need a holiday.

[we all broke up laughing here] I went back home and told my husband, I need a holiday. So my husband said, don't go back to this doctor if he tells you that. [we kept on laughing. She offered us coffee.]

O: So eventually you got better?

M: This doctor is mad, [more jokes about holidays] ... I kept going to him. I had my holidays two and a half years ago. Syria, Lebanon, I came back feeling much better. [Laughter]

O: But until then, after being in hospital, how long before you felt OK?

M: My husband stayed with me away from his work for 5 months. For about 2 years, on and off I felt better and worse.

O: Doctor gave you medicine?

M: Yes. They made me feel better but I could not feed my son... The doctor told me double the dose, and it didn't make me feel better, just sleepy. The child came in 1994, he is 5 now. My life was different because I had to look after the baby.

O: Did you know what to do?

M: I knew how to look after a baby. He is all I have, so I was happy to look after him. I was very unwell physically and mentally after the baby. After he was 2 yrs and 7 months and I went to Lebanon, only then did I feel better.

O: Do you think you had Post Natal Depression?

M: I told the specialist and he agreed I was depressed. He said he could not treat me for depression, I would have to look after myself he was an Australian specialist.

O: With an interpreter?

M: My husband was the interpreter [we laughed with dismay]

O: So what kept you going during those two years?

M: I felt I was defeated, that I was not strong any more after the birth.

O: So how did you cope?

M: I just stayed at home, would go up Sydney Road for a walk, Kmart and Coles. I had one girlfriend only. Now I have a lot, my life is different and I am happy. I went to Lebanon, still on my tablets. Every time I didn't take a tablet, I thought something terrible might happen to me. I was happy in Lebanon, I bought a car, I had my baby, stayed with my brother and then my sister in Syria.

O: So all of the sudden you felt well, did you, without your husband you felt great?' [We laughed]

Mifsud's account suggests the consequences of not using professional interpreters and the paucity of professional skills in treating her in isolation from her living conditions. Mary was a Filipino nurse, with full English fluency. The privatised JobNetwork system had pleasant staff but kept referring her to factory positions because 'she had no local experience'. The evidence suggests a very minimalist level of service, with no information about the available bridging courses for overseas nurses, no effort in investigating options for a nurse with full English fluency, no advice about other study options nor about interview techniques with Australian employers who expect assertive self promotion, compared to the self-effacing norm of civilised Asian people. She saw an advertisement for a course in Aged Care Support at the local TAFE by accident and was then able to change careers.

Conclusion

The women's narratives provide insights about the human condition, that is, the centrality of connectedness and a meaningful sense of one's place in the world beyond the home. Even this group of unusually resilient women from privileged backgrounds would not have been able to surmount adversity and begin to participate as citizens without the public services of Australia's welfare state, however rudimentary some of them were. Sponsorship arrangements, more often than not break down because of sponsors' own material and social fragility. Few established families would be able to endure another family co-habiting with them for two years, nor could they afford to fully support them financially. In the present study, the women who were most vulnerable to domestic violence were primarily isolated due to their total dependence on their sponsors, the perpetrators. When they did connect with basic information about supports, they were able to escape their abusive conditions. Sponsorship arrangements are the most prevalent conditions for immigration now.

Welfare states operate to artificially recreate certain functions provided by natural social embeddedness that have been disrupted by the requirements of industrialisation and, more recently, of a consumerist society where needs are manufactured by capital. I noted in the women's accounts the exponentially beneficial relationship between the very modest investments of public funds into services, such as neighbourhood houses, English classes, a community worker, a playgroup and local employment program, and the quantum leap the women were able to make in rebuilding their lives. Such enormous strides usually depended on the medium of a positive connection with another human being, whether a professional or a friend or neighbour. A lack of skills or negligence on the part of professionals had, some times, disastrous impacts on women's lives and their families, over protracted periods of time. Rather than being divisive, the policies and programs valorising multiculturalism facilitated the release of great human capital and the building of a vibrant civil society based on trust and appreciation of diversity in daily life (Parekh 2000). One can reasonably question whether the serendipitous role played by the welfare state may not also be equally applicable and necessary to facilitate the self determination of Australian born people.

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