The experience of individuals affected by Australia's international border closure during the COVID-19 pandemic

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ABSTRACT

This study explored the experiences of individuals who reported being negatively affected by Australia's international border closure during the COVID-19 pandemic. Qualitative data from 1930 adults who responded to a cross-sectional online survey exploring the mental health and wellbeing of individuals affected by border closure were analysed using theoretical thematic analysis, drawing on understandings of the relationship between place and wellbeing. Four themes were identified: 'Disconnection from family and social connections', 'Disconnection from a sense of home and belonging', 'Disconnection and sense of self', and 'A desire for reconnection'. Results provide a rich illustration of the relationship between disconnection from place and wellbeing during COVID-19 and highlight the need to support those affected and consider these adverse effects in future public health planning.

1. Background

The emergence of COVID-19 in late 2019 and the declaration of a pandemic in early 2020 led to a range of governmental responses to mitigate risks associated with the virus, including travel restrictions such as national and international border closures. In Australia, international borders closed at the beginning of the pandemic in March 2020 (Adenkunle et al., 2020). Until recently, individual travel exemptions from the Commissioner of the Australian Border Force were necessary to enter or leave the country (Department of Home Affairs, 2021). While leaving the country required an exemption for all individuals (which in many instances was not granted), in theory, some individuals (e.g., Australian citizens, Permanent Residents) were exempted from restrictions to enter the country; however, weekly arrival caps prevented many from entering the country. Others, including parents of Australian citizens and permanent residents or visa holders, were not able to enter the country at all without an exemption until the end of 2021. Importantly, a high proportion of these travel exemptions were refused by the

Australian Department of Home Affairs; between March 2020 and July 2021, more than 36% of outwards (109,782/299,126) and 69% of inwards (130,663/188,282) travel exemption applications were refused (Australian Government, 2022). While restrictions have eased for the above-mentioned groups and arrival caps have been lifted in most states, a significant number of individuals continue to experience difficulties in entering or leaving the country including individuals wanting to leave or enter Western Australia, those on bridging visas, or those not vaccinated (as of February 2022).

A recent scoping review identified several unintended negative health and societal consequences because of international travel measures. These included economic and social consequences as well as issues related to mental health, wellbeing, and quality of life (Klinger, 2021). Our survey conducted in 2021 among almost 4000 individuals who have been negatively affected by the Australian international border closure found that almost all participants (84%) reported high or very high levels of psychological distress and low wellbeing, highlighting the elevated mental health risk profile among this group (Ali

et al., 2022).

There is a distinct spatial element to governmental responses to the COVID-19 pandemic, including lockdowns (or stay at home orders), physical distancing requirements, lack of access to public spaces, mandatory quarantine, and border closures (Devine-Wright et al., 2020). This raises the question of "what … the virus [is] doing to our sense of place, to our sense of who we are, and to our understanding of togetherness" (Bissell, 2021, p, 51). This is an important question to ask to gain a deeper understanding of the effect of border closures during COVID-19.

Place is an important element of the human experience, extending beyond the physical aspects of place (such as natural and built environments) to its relational and experiential aspects. As such the concept of place can be understood as a "lived environment … interpreted by the individuals and constructed through social interactions, cultural values and shared meanings" (Doroud et al., 2018, p, 111). This lived environment and its relational, affective, social, and material dimensions can be either supportive or undermining to wellbeing (Bell et al., 2018; Duff, 2011).

At a fundamental level, our sense of who we are is tied to place (Marques et al., 2021). Attachment to place provides a sense of belonging to a country, a sociocultural group, and/or a local community, supports emotional regulation, and promotes a sense of identity (Counted et al., 2021a). Disconnection from place, also termed place attachment disruption (Counted et al., 2021a), has a profound effect on our identity and our wellbeing (Chen, 2020; Gladkikh et al., 2019; Pike and Crocker, 2020). Disconnection from place can occur for a variety of reasons, such as through migration (Butcher, 2010; Gladkikh et al., 2019; Reis et al., 2020; Wood and Martin, 2020), natural disasters (Greer et al., 2020; Helsel, 2018; Rahmayati et al., 2017), climate change (Potter, 2013), or via changes in the experience of place without physically moving such as through gentrification or urbanisation of rural areas (Dagg et al., 2017).

Disconnection from place has also been discussed in the context of government responses to COVID-19 (Bisell, 2021; Counted et al., 2021a, b,c; Canosa et al., 2020; Devine-Wright et al., 2020). Devine-Wright et al. (2020), for example, discuss how the COVID-19 pandemic has implications for our understanding of our relationship with place in terms of three dialectics. These include emplacement-displacement, where government measures such as 'shelter-in-place' lead to people being "emplaced in some locations, and displaced from others" (Devine-Wright et al., 2020, p. 2); inside-outside, where "the ability to create meaning about place through comparison to what is inside versus outside" (Counted et al., 2021a, p, 5) is disrupted through practices such as working and studying from home; and fixity-flow, the "tension between the static and the mobile" (Devine et al., 2020, p; 2) aspects of people's experience of place, which has been affected by being confined to certain places during the pandemic. Counted et al. (2021a, p,8) note the potential for disconnection and disruption of our relationships with place during COVID-19 to "evoke a state of distress that constitutes suffering" (Counted et al., 2021a, p, 8).

For those whose lives are underpinned by spatial mobility, such as individuals living and working abroad or migrants and refugees with family abroad, connection to place is experienced across borders. This has been referred to as time-space compression resulting from a sense that our world is shrinking due to growing opportunities for international travel and connection to people, goods, and cultures across the globe (Bissell, 2021). While some argue that mobility and globalisation result in disconnection from place (Ballard et al., 2005), others argue that the experience of home and belonging is transformed from a single, fixed location to one encompassing multiple places and spaces (Butcher, 2010; Trabka, 2019), a "polycentred construction of meaning involving a multiplicity of significant places" (Simonsen and Koefoed, 2015, p, 532). This mobile sense of place has been disrupted worldwide by international and national border closures due to the COVID-19 pandemic, such that "the pandemic has rewritten our global sense of place and

changed our emotional geographies in the process" (Bissell, 2021, p, 152).

Results of our survey of individuals who have been negatively affected by the Australian international border closure, discussed above (Ali et al., 2022), demonstrate a highly elevated mental health risk profile. This study aimed to examine the qualitative data from the survey to explore experiences of individuals who have been affected by Australia's international border closure during the COVID-19 pandemic in greater depth, drawing on theoretical understandings of place and space to gain a deeper understanding of *why* participants reported poor levels of mental health and wellbeing (Michaelson et al., 2009).

2. Method

The current data was collected as part of a cross-sectional online survey investigating the mental health and wellbeing of individuals who have been negatively affected by the Australian COVID-19 international border closure (Ali et al., 2022).

2.1. Participants and procedure

Recruitment took place via social media including posts in relevant Facebook groups (e.g., "Travel Exemption Australia", "Parents are Immediate Family Members") and paid Facebook ads targeting individuals who have been affected by international border closures. Participants who were interested in the study (no specific inclusion criteria) completed an anonymous 30-min online survey (22 June – 27 July 2021).

2.2. Data collection

Participants completed socio-demographic questions including age, gender, education, citizenship, current location, state (if in Australia), country of birth, ethnicity, education, employment, income, marital status, and children. Participants were asked two general questions regarding the effect of border closure: How has your life or your plans been affected by the current Australian international border closure? (Response options: negatively affected; positively affected; neither); To what extent has your life or your plans been negatively/positively affected by the current Australian international border closure (Slider 0 (Not at all) to 100 (Extremely). They then completed a range of measures of the impact of the COVID-19 International border closure, as follows.

Scenarios. Participants were asked which of the following 6 scenarios best described their current situation (they were specifically asked to only select the reason that had mostly affected them). Participants residing in Australia were asked whether they were affected because they (1) wanted to leave Australia, (2) wanted someone to come to Australia, or (3) other (text entry). Participants overseas were asked whether they were affected because they (4) wanted to enter Australia, (5) wanted someone to leave from Australia, or (6) other.

Reasons. Participants further reported the main reason why they were affected by selecting one of the following options: separation from partner/family/friends, employment, study, personal safety/health, holiday, or other. Furthermore, they responded to what extent they perceived this specific reason had negatively affected their mental health through a visual analogue scale from 0 to 100.

Mental health and Wellbeing. Participants answered a range of measures related to their mental health and wellbeing (see Ali et al., 2022 for a detailed list of measures and quantitative results). Psychological distress was measured with the 10 item Kessler Psychological Distress Scale (K10). Items were rated on a five-point Likert scale (ranging from "none of the time" to "all of the time") resulting in a score of 10–50; greater scores indicate greater levels of psychological distress (range 10–50; 10–15: low, 16–21: moderate, 22–29: high, 30–15: very high) (Kessler et al., 2002).

Qualitative data. At the end of the survey, participants were asked the following: "If there is anything further that you would like to share about the way you have been affected by the international border closure in Australia, please feel free to share it here" (an open-ended text box was provided where participants could elaborate on their experience). These responses were included in the current qualitative data analysis.

2.3. Data analysis

Given the role of place in the pandemic experience, and in particular the experience of international border closures, the qualitative responses to the survey were analysed using theoretical thematic analysis (Braun and Clarke, 2006) drawing on theoretical concepts relating to place. Following Braun and Clarke (2006), two of the authors (CO, EMC) familiarised themselves with the data and independently identified codes. These authors then met to collate codes into potential themes, which were presented to the broader team (KA, MI, DBF) and further refined. Interpretive analysis was then undertaken through asking a series of questions of the data in relation to theoretical concepts of place, namely: "What does this theme mean?"; "What assumptions underpin it?"; "What are the implications of this theme?"; "What conditions may have given rise to it?"; and "Why do people talk about this thing [border closure] in this particular way (as opposed to other ways)?" (Braun and Clarke, 2006, p. 94). A thematic map of the analysis was then generated, and themes refined and named during team meetings to identify the "overall story the different themes reveal about the topic" (Braun and Clarke, 2006, p. 94).

2.4. Ethics

The study was approved by the university's Human Research Ethics Committee (Project ID: 4534). All participants provided informed consent online before commencing the survey.

3. Results

A total of 1930 participants responded to the free text question (49% of the participants who completed the online survey). Participants who completed the free text question were predominantly well educated, with 85.9% having a Bachelor degree or above, and earned a high annual income, with over a third (36.6%) earning between $100 - $200,000 per annum (see Table 1 for participant characteristics). Over half (58.7%) experienced very high levels of psychological distress (as measured by the K10). All participants who responded to the free text question indicated they had been negatively affected by border closure.

The qualitative data shows that participant's individual situations were complex with immediate and extended families unable to travel to be reunited, as the following example illustrates:

'As a Granny living in South Africa, I completed this survey with tears running down my face. I was booked to come over and see my little grandchildren in June 2020 and couldn't fly and they cannot fly here. In Jan 2021 my precious husband was diagnosed with Parkinson's Disease which will probably put paid to our plans to move to Australia, which we planned to do once he retired (which is tomorrow-30 June). Fear of the unknown frightens me and my heart aches daily. Spend so much time crying and sometimes I feel it would be easier if life was just over. It is killing me inside to not be able to see children & grandchildren overseas.' P39

While participants at times commented on the need for government measures such as border closure during a pandemic, the interconnection between negative effects on wellbeing and sense of place was evident. In what follows we describe the experiences of those affected by Australia's international border closure during COVID-19 and the effect of border closure on participants' sense of place.

For participants in our study, the disruption of sense of place through

Table 1
Participant characteristics.

	In Australia (n = 1245)	Abroad (n = 685)
Age mean (sd)	39.73 (11.1)	37.82 (12.8)
Age group (years)		
18-24	49 (3.9)	66 (9.6)
25-34	422 (33.9)	290 (42.3)
35-44	403 (32.4)	147 (21.5)
45-54	202 (16.2)	80 (11.7)
55-64	124 (10.0)	68 (9.9)
65 or more	34 (2.7)	27 (3.9)
Gender (female)	1008 (81.0)	544 (79.4)
Citizenship (Australian)	822 (66.0)	369 (53.9)
Education (Bachelor degree or above)	1070 (85.9)	598 (87.3)
Employment (Full time)	653 (52.4)	364 (53.1)
Marital Status		
Single	102 (8.2)	123 (18.0)
In a relationship	247 (19.8)	156 (22.8)
Married	609 (48.9)	272 (39.7)
Defacto	221 (17.8)	101 (14.7)
Divorced/Separated	49 (3.9)	21 (3.1)
Widowed	10 (0.8)	4 (0.6)
Prefer not to answer	4 (0.3)	6 (0.9)
Annual household income		
Less than $25,000	32 (2.6)	83 (12.1)
$25 - $50,000	100 (8.0)	91 (13.3)
$50 - $100,000	288 (23.1)	166 (24.2)
$100 - $200,000	456 (36.6)	134 (19.6)
More than 200,000	211 (16.9)	80 (11.7)
Prefer not to answer	135 (10.8)	95 (13.9)
No income	18 (1.4)	35 (5.1)
Psychological distress (K10)		
Low	45 (3.6)	23 (3.4)
Moderate	134 (10.8)	79 (11.5)
High	334 (26.8)	193 (28.2)
Very high	731 (58.7)	390 (56.9)

Participants mostly wanted to leave Australia (28.5%), have someone else enter Australia (26.6%), or wanted to enter Australia themselves (29.4%), with the main reason being to be with partner, family, and/or friends (85.9%) (see Table 2).

Table 2
Scenario and reasons why participants were negatively affected by border closure.

	Total (%)	Australia (%)	Abroad (%)
Scenario, n	1930	1245	685
Wanting to leave Australia	551 (28.5)	551 (44.3)	–
Wanting someone else to enter Australia	514 (26.6)	514 (41.3)	–
Wanting to enter Australia	567 (29.4)	–	567 (82.8)
Wanting someone else to leave Australia	55 (2.8)	–	55 (8.0)
Other	243 (12.6)	180 (14.5)	63 (9.2)
Reason, n	1890	1218	672
To be with partner, family, friends	1619 (85.9)	1112 (91.3)	507 (75.4)
Employment or economic	75 (4.0)	2.4 (2.5)	45 (6.7)
Study	69 (3.7)	4 (0.3)	65 (9.7)
Holiday plans	16 (0.8)	13 (1.1)	3 (0.4)
Personal safety/health	49 (2.6)	33 (2.7)	16 (2.4)
Other	62 (3.3)	26 (2.1)	36 (5.4)

Note: Of those who responded 'other' for scenario, 176 participants (137 in Australia, and 39 abroad) reported having been affected by both.

border closures has been experienced as disconnection from place, both in terms of being unable to physically move between places and through the change in participants' experience of place (Chen, 2020). Four main themes were identified, namely 'Disconnection from family and social connections', 'Disconnection from a sense of home and belonging', 'Disconnection and sense of self', and 'A desire for reconnection'.

Participants are identified in quotes using their participant number.

3.1. "My heart aches daily": Disconnection from family and social connections

Prior to international border closures, participants experienced the time-space compression described in the literature through the ability to travel long distances relatively quickly and be physically close to family and friends on a regular basis:

'Before the pandemic my parents would visit a few times a year and I really relied on it for my mental health and to help looking after my young child.' P158

The ability to travel quickly and easily to see family and friends, or have family travel to be with them, was an important driver for those who had decided to move to another country or pursue a long-distance relationship.

'Yes, we chose to live overseas – but that was on the basis that we would be able to return home within a few days if needed.' P973

'I have a long distance relationship with my partner in the US. … we were always able to travel back and forth several times a year. Our relationship relies on that freedom to travel and be together.' P586.

Following the border closure, participants experienced disconnection from family and social connections through "time-space expansion" (Bissell, 2021, p, 152), defined by the inability to physically connect and 'be there' for each other, and the experience of time lost and losing time due to extended periods of separation. This is described further below.

3.1.1. Physical separation from loved ones

Being physically separated from loved ones for extended periods of time due to closed borders, and without clear information about when they would be able to reconnect, has caused significant distress to participants, as illustrated in the following quotes:

'Being separated from someone you love for such extended periods, during such a tumultuous time is a special kind of torture.' P121

'I just want to see my partner. I'd do anything to do so, and it's tearing me apart inside.' P740

Being disconnected from family and friends also caused social isolation and loneliness:

'Many times I feel lonely but I can talk to someone if I really want to. But they are not my true long-time friends or my parents which are my whole world' P7.

Physical proximity to family and friends during significant life events, such as births, deaths, and marriages, was particularly important. While the use of videotelephony and teleconferencing allowed participants to see and interact with loved ones and was widely used to remain in contact, the experience was deemed stressful and a poor substitute for physical contact:

' … the loss of my 5 week old niece in the UK and having to attend her funeral live stream three days after my son was born has had huge detrimental effects on my health.' P215

'They (mum and Dad) cannot really see my child's personality developing over video calls and interaction of the type important to a toddler (touching, doing things together) is impossible via video link.' P371

Lack of proximity led in some cases to a breakdown in relationships and divorce:

'I'm a [Fly-in-Fly-Out] worker and have been living [overseas] on my breaks for eight years. [My wife of] four years … left me because I couldn't return home to her. We had bought a house together just

before Covid started, which I've lost along with my dog and all my possessions.' P977

'I'm away from my family and husband last 2 years. Because of border closure my marriage is near to break. Me and my husband can't handle this distance relationship. I'm in fear to divorce soon if we will not meet [soon].' P952.

The definition of what constitutes 'family' regarding their ability to travel, or have others travel to be with them, caused further distress and frustration:

'Extreme frustration with the Australian Border Force making arbitrary declarations on who they recognise as de facto partners. Even families with children who have been together for 8+ years are rejected as not meeting the Australian definition of a family, without a reason being provided.' P189

'Seeing that parents are not considered immediate family - only reading this information makes me distressed.' P1550

Linked to the lack of physical proximity with loved ones was the issue of time lost and losing time.

3.1.2. Time lost and losing time

Participants described the experience of time lost through family members missing out on watching children grow and the inability to be with and support loved ones who are growing old:

'I find it sad that they are missing out on seeing their grand children grow up and them seeing their grandparents, building a relationship, getting to know each other, learn from grandparents, grandparents getting joy and purpose from them and having something in life to look forward to, they used to visit yearly for several months.' P809

'Losing time with ageing parents is incredibly sad. Not being able to support sick and ageing parents is unfair. Taking away family relationships and support is cruel. We need to know when we will be able to see family.' P1217.

Participants described this experience of time lost as one of grief and loss:

'I'm frustrated, angry and have a huge sense of grief for the lost time my parents are missing with my children.' P608

There was also a strong sense of fear associated with losing time in terms of their expectations and plans for their future lives, a sense of "life [being] put on hold" (P410). Many couples expressed distress about being apart, being unable to marry or plan for their future. Women of childbearing age separated from their partners reported an acute awareness that their biological clock was ticking, and, for some, time was running out to start or extend a family:

'The lack of clarity over when the borders will open is the hardest. I'm now planning to leave Australia permanently because there is no timeline over when my partner and I will be able to get married unless I do.' P1728

'I am 31 now. I, and my biological clock, cannot keep waiting for the borders to open.' P1664

In addition to being disconnected from friends and family due to international border closures, participants also experienced disconnection from a sense of home and belonging.

3.2. "Abandoned by my … country": Disconnection from a sense of home and belonging

Participants' sense of home and belonging prior to border closure was experienced across borders through a mobile experience of place.

Living abroad while able to travel across borders meant participants could maintain connections with family, friends, community, and 'home'. This allowed them to continue to have a sense of belonging to both their current residence and the country they had left. Border closures have disrupted this sense of home and belonging:

'Everyone I know who moved here [Australia], did it safe in the knowledge that 'home' was just a plane ride away. When that's taken from you, it's debilitating. Knowing you can't go back if something happens is suffocating.' P758.

This led to participants (both Australians living abroad, and those who migrated to Australia) feeling "like a second-class citizen" (P459) and that they "don't feel [they] belong here anymore" (P615).

Participants described their distress at the lack of understanding of the experiences of those affected by border closure by the broader Australian population. They described an 'us and them' mentality and that they have been sacrificed for the good of Australia. This led participants to feel "abandoned" (P1680) by Australia and Australians:

'Seeing how Australians overseas are being spoken about and treated in Australia makes me wonder if it's really home anymore, which is causing me an existential crisis. Feeling unwanted and rejected by your own country is painful beyond measure.' P1548

'As a migrant who has been in Australia for 20 years, I have never felt so foreign in both the cultural sense and my sense of belonging. Australians have turned their backs on their migrant population and refuse to understand why the travel ban is so difficult for people with no family in the country.' P968

This experience of abandonment is compounded by feelings of anger that those with a high profile (such as politicians, celebrities, and sports players) are allowed to move across borders.

'It's shocking to see and hear football teams able to cross state borders, famous people and sporting people fly in and out. I'm an Australian!!! Let me come home!' P688

Disconnection from home and belonging for people whose pre-pandemic lives were defined by mobility was also paradoxically experienced through 'emplacement' in the form of being "pinned to place" (Devine-Wright et al., 2020, p, 2) for those who were not allowed to leave Australia. Being pinned to place was expressed in terms of feeling "like a prisoner" (P1508) and "trapped" (P1057) due to border closures.

There were also material effects of loss of home in terms of jobs, housing, and financial difficulties. Housing issues included leases ending and having to find alternate accommodation, attempting to secure accommodation in Australia and then not being able to return, and the logistics of storing property and belongings. Employment and financial concerns were commonly reported with participants' work contracts expiring and being unable to return to Australia and having no ongoing employment.

3.3. "This has broken me": Disconnection and sense of self

The experiences of disconnection described above furthermore affected participants' sense of self in relation to their experiences of mental wellbeing and identity. The negative effects of international border closures on mental wellbeing reported in the quantitative findings was given voice in the pain and anguish reported in the qualitative data. Disconnection from friends and family led to a profound sense of loneliness, grief, and loss, as well as "guilt and shame for being away from [family]" (P1777). This was further exacerbated by the experience of disconnection from a sense of home and belonging resulting in loss of identity.

Worry, depression, and anxiety were predominant characteristics of participants' experiences. For some, border closure resulted in extreme levels of distress expressed in suicidal ideation.

'My mental health has spiralled out of control. I have daily panic attacks, I don't want to leave the house for fears that I can't understand. … I don't want to see anyone or talk to anyone because I'm so home sick.' P1903

'I have been suicidal with severe depression since the border closed' P1437

Lack of autonomy due to not knowing when borders would open, or exemptions granted, led to feelings of "helplessness and lack of control" (P538), contributing to a deterioration in mental wellbeing:

'Having no control over when it is possible to see my partner again is the worst.' P33

'Not knowing when I will be able to see [my family] causes a huge mental strain, which affects my everyday life.' P973

'The never-ending psychological effects of not knowing if I can come home or not.' P1744.

These experiences of mental health problems represent a disjunction between how participants saw and understood themselves pre- and post-border closure.

Participants had a clear sense of who they were prior to the international border closures. They described facing many challenges in their lives, often associated with moving to or from Australia or maintaining long-distance relationships. They were able to overcome or manage these challenges, creating a sense of self encompassed by the notion of resilience. This experience of self was disrupted post border closure as they saw their mental health declining. As one participant stated:

'I consider myself a highly resilient person normally but this ongoing situation with no targeted end date in sight has finally broken me.' P272

Participants who had previously experienced positive mental health described developing mental health problems for the first time in their lives:

'Now I find myself going through manic depressive episodes, anxiety attacks and night terrors, which have never happened to me before.' P99

'This is the first time in my life I am seeking help to manage my mental health. My life is falling to pieces and I'm powerless to stop it, I just have to watch it happen.' P1848

'I am a confident, positive, and optimistic person by nature who's had lots of challenges to deal with so far, but they only ever made me stronger. This is the hardest one yet and I have - for the first time - needed mental health support.' P265

Participants with existing mental health issues or those in recovery from mental health issues experienced a resurgence of symptoms, leading to increased use of medications and accessing psychological support and psychiatric services:

'I suffer anxiety normally but since the pandemic what was occasional anxiety attacks have now become regular.' P895

The protracted nature of the border lockdown was perceived to be a major stressor together with there being no targeted end date in sight, increasing distress associated with such uncertainty:

'Although I was on medication for my anxiety and depression before, with the border closures having no hard end date or clear way out, I have had to double my medication as I was just not coping.' P29

Participants' sense of self was furthermore affected by loss of identity, where not feeling like they belong in their home country undermined their identity as 'Australian':

'Through Covid 19 it has felt as though I have lost my identity. The way the government from local to federal and citizens in Australia have treated those of us living abroad makes me feel like I'm no longer Australian despite spending most of my life there. I think it's been hard losing who I thought I was.' (P1858)

Disconnection from family and social connections and from a sense of home and belonging therefore had a significant effect on participants' sense of self. This created a strong desire for reconnection to place. As one participant stated, answering the survey questions led to them "remembering how I used to be and want to be again" (P538).

3.4. "I want to leave Australia": A desire for reconnection

As discussed previously, prior to international border closures, mental wellbeing and sense of self were facilitated through a mobile experience of emplacement for those living remotely from family, friends, and country. This was enabled due to the experience of time-space compression (allowing proximity with loved ones) and a mobile sense of place (creating feelings of home and belonging across borders).

The experienced of disconnection from place due to international border closures led participants to express the desire for reconnection to place by leaving Australia for good or never returning to Australia:

'We are considering a return to the UK permanently due to this and I've been here for 24 years! It's affecting my mental health every day.' P1154

'The Government's closed borders have destroyed my marriage and my life, not COVID. I've been stuck alone … for over 450 days in permanent limbo, just waiting to leave Australia and start my life again. I plan on leaving Australia permanently in the very near future.' P977

The sense of belonging being experienced across borders prior to the pandemic, and the fracturing of this mobile sense of home and family relationships due to border closures leading to a desire for reconnection, can be seen in the following quote:

'I feel heartbroken and betrayed by a country I love to call home. I am strongly considering moving back to my home country not because I want to, but because I can't face the thought of not seeing my family for so long.' P447

4. Discussion

These findings provide a rich illustration of the experiences of individuals negatively affected by being prevented from either leaving or coming to Australia, due to the international border closures during the COVID-19 pandemic. The fact that so many participants responded to an 'Any other comments' text box in an online survey, and with such volubility, is indicative of the potency of their experiences. The quantitative aspects of the survey provided cross-sectional data on levels of distress experienced by those negatively affected by international border closure (Ali et al., 2022). The analysis of the qualitative data reported here adds depth to our understanding of their responses to the survey questions and highlights the role of place in explaining participants' levels of distress.

The COVID-19 pandemic has had a profound effect on how individuals see themselves and the places and spaces in which we live. Devine-Wright et al. (2020) point to the way in which public health measures such as stay-at-home orders and border closures have "elevated the power of place in our consciousness, reminding us that we live an emplaced existence" (p, 2). Counted et al. (2021) similarly point to the way in which the pandemic has restricted our access to places and place-based activities and "disrupted place identity" (p, 4), heightening our awareness of the extent to which human life is tethered to place. Our study of those affected by Australia's border closure adds to this emerging body of literature on the effects of COVID-19 on our experience of place, identifying the significant effect of international border closure on family relationships, social connections, and sense of self and belonging.

The depth of anguish expressed by participants is echoed in Simic's (2021) personal reflection on the experience of being a migrant woman 'locked in' Australia while being 'locked out' from her family and home during the pandemic. Counted et al. (2021c) have furthermore discussed the potential for pandemic-related disconnection from place "to evoke a state of suffering" (p, 46), understood as "perceived intolerability concerning the intensity of the negative experience or length of time one expects the undesired state to last" (p, 48), exacerbated by the "ambiguous timeline" (p, 51) of disconnection from place during the pandemic. Certainly, for our participants, the uncertainty of the timeframe of border closure and lack of control over the duration of separation from loved ones was perceived as intolerable, exacerbating their sense of loss of social and family connection and sense of belonging and identity. The expression of a desire to leave Australia permanently, or never return to the country, is also consistent with Counted et al.'s (2021c) discussion of potential responses to place attachment disruption during COVID-19 through detachment from place as a coping mechanism. Detachment expressed as a desire to leave has also been identified in previous research on the effect of changed neighbourhoods and communities in Ireland resulting from the financial crisis of 2008 (Dagg et al., 2017).

As Devine-Wright et al. (2020) have discussed, public health responses to COVID-19 have created tensions between our experiences of emplacement-displacement, inside-outside, and fixity-flow. Our research adds to this understanding of changed place experiences due to COVID-19. Emplacement through international border closure, for example, could be experienced as a sense of safety and protection for many Australians, yet our participants experienced this emplacement negatively as entrapment. The international border closure thus created a tension between participants' experiences and those Australians who were viewed as less negatively affected. The perceived lack of compassion and understanding from Australians about the effect of international border closures on participants' lives and wellbeing created feelings of exclusion and being unwanted, with a resulting loss of a sense of belonging to Australia and Australians. This also relates to the inside-outside dialectic. While this typically refers to the relationship between public and private places (Counted et al., 2021a), the international border closure expanded this to incorporate inside versus outside Australia, further exacerbating the loss of a sense of belonging to Australia for participants.

The fixity-flow dialectic refers to the relationship between mobile and static interactions with place (Counted et al., 2021a; Devine-Wright et al., 2020). While for many people this dialectic was experienced at a local level through being confined at home or to neighbourhoods, our participants' experience of fixity-flow was further disrupted due to the loss of their previously mobile lives. Other researchers have also noted the ways in which the pandemic has changed the experience of mobility (Butcher, 2010), where COVID-19 has "revers[ed] what we have become used to about a world defined by mobility and connection" (Bissell, 2021, p, 150). Our previous sense of compressed time and space through relative ease of travel has reversed to an expanded sense of time and space. The consequence of this has been the loss of the cross-border connections that are so fundamental to the wellbeing of those who live separately to their loved ones and who experience a "polycentred construction of meaning involving a multiplicity of significant places" (Simonsen and Koefoed, 2015, p, 532). Participants in our study experienced significant disruptions to the mobile sense of place that supported their ability to maintain relationships and sense of belonging prior to the pandemic. Participants reported having made decisions about where they live and work based on their ability to move between places to see family and friends. The international border closures removed this choice and created feelings of guilt about the effect of their

earlier life choices on their loved ones.

Authors have also discussed the role of power in the experience of place that has been highlighted by the pandemic. The "uneven distribution of power over access to and exclusion from place" (Devine-Wright et al., 2020, p, 2) during the COVID-19 pandemic demonstrates the disproportionate effect of the virus on disadvantaged groups (Brown and White, 2020; Jay et al., 2020; Smith et al., 2021; Xafis, 2020). Our participants differ from many of those who experienced disadvantage during COVID-19 due to their relative affluence, as indicated by their annual household income. While the quantitative survey results indicated that participants who were visa holders experienced higher levels of distress than Australian citizens or permanent residents (Ali et al., 2022), distress was extremely high across all groups and the powerful effect of being disconnected from place expressed by participants who contributed qualitative data was similar across all participants. This highlights the ubiquity of the importance of place to wellbeing.

Marginalised groups continue to experience loss of connection to place beyond the pandemic, both due to ongoing effects of the pandemic itself and the broader socio-political effects of war and climate change. It is arguable that those who live in relative affluence, such as our participants, would be better resourced to reconnect with place in a post-pandemic world. Yet this is not to deny the depth and intensity of their experiences. As Counted et al. (2021c, p, 52) note, understanding the experiences of those who were disconnected from place during COVID-19 "could lead to more informed treatment approaches for supporting people who have been separated from places of attachment". This understanding of disconnection from place during pandemics also teachers us the importance of considering people-place relationships in public health discourse (Counted et al., 2021b). Policy measures that recognise the importance of place include funding initiatives to foster a sense of belonging and cultivating community-based resources to enable communities to better respond to and recovery from pandemics (Counted et al., 2021b).

5. Limitations

A limitation of this study is that it reports on the experiences of those who were negatively affected by the Australian COVID-19 border closure. Participants in the original survey were asked whether they were positively or negatively affected by border closure. However, only a minority (n = 81) were positively or "neutrally" affected and only those who were negatively affected answered the open-ended question asking if they would like to share anything further and provided the qualitative data analysed here.

6. Conclusion

The closing of Australia's international border during COVID-19 has had a significant negative effect on the mental health and wellbeing of many of those directly affected by it. This study demonstrates the role of disconnection from place in explaining why the international border closure caused such distress in participants. Public health measures are necessary during pandemics to mitigate pandemic-related risks. However, it is also important to consider the mental health and wellbeing of those negatively affected by measures such as border closures and how those affected might be better supported both during and after the international border closure. This could include educating health and mental health service providers about the significant negative impact these individuals had experienced as well as offering specific mental health support options for individuals who were born overseas or have family overseas. For example, it might be beneficial to provide individuals with digital resources that have been proven effective to improve mental health and wellbeing in other vulnerable populations (Fassnacht et al., 2022). Future policy decisions should take the need for mental health support and the importance of connection to place into account when implementing measures such as international border closures during times of a crisis.

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