

Assessment of Psychosocial Disturbance of Immigrants in AL-Najaf Refugee camp.

تقييم الاضطرابات النفسية-الاجتماعية للمهاجرين في مخيم اللاجئين في النجف

*Haider H. Ali /Master in Nursing Science, University of Babylon/ College of Nursing

**Dr. Shirooq M. Jacob/PhD in Nursing, University of Baghdad/College of Nursing

Haidermsn@gmail.com

الخلاصة:

يعاني معظم المهاجرين من اضطرابات نفسية شديدة مثل الكآبة والقلق نتيجة تعرضهم الى ظروف حياتية قاسية، اجريت الدراسة الحالية للمدة من الثاني من نيسان عام ٢٠٠٨ ولغاية الثاني من تشرين الاول من عام ٢٠٠٨.

الهدف: تهدف الدراسة الى تقييم الاضطرابات النفسية-الاجتماعية للمهاجرين في مخيم اللاجئين في النجف.
المنهجية: جمعت عينة البحث بالطريقة العشوائية وشملت ١٠٠ مهاجر سكنوا في مخيمات اللاجئين في محافظة النجف للفترة من ٢٠٠٦ الى ٢٠٠٨ نتيجة الوضع الخاص بالعراق. بنيت الاستبانة لغرض تحقيق اهداف الدراسة من ثلاثة محاور رئيسية والمكونة من ٤٠ فقرة هي ، الموصفات الديموغرافية للمهاجرين والاضطرابات النفسية (القلق والكآبة) و الجوانب الاجتماعية ولتحديد الثبات والمصدقية للاستبانة تم اجراء الدراسة المصغرة وعرض الاستبانة على الخبراء، وجمعت البيانات من خلال المقابلة كطرق لجمع العينة. تم تحليل البيانات من خلال التحليل الاحصائي الوصفي [التكرار، النسبة المئوية] والتحليل الاحصائي الاستنتاجي.

النتائج: أشارت نتائج الدراسة الى وجود اضطرابات نفسية شديدة عند الناس المهاجرين مع ضعف الجانب الاجتماعي. اضافة الى وجود ارتباط معنوي عالي بين الجوانب النفسية [القلق والكآبة] والجوانب الاجتماعية كذلك وجود ارتباط معنوي بين الجوانب النفسية مع العمر، المهنة، عدد افراد الاسرة.

الاستنتاج: استنتجت الدراسة ان المهاجرين مصابين باضطرابات نفسية بمستويات مختلفة وأغلبهم من مستوى اجتماعي ضعيف .

التوصيات: توصي الدراسة بضرورة توجيه العناية الكبيرة من قبل المؤسسات الاجتماعية ووزارة الصحة بحل مشكلات الامهجرين للحد من الاضطرابات النفسية وكذلك انشاء فريق متخصص بالصحة النفسية يزور المهاجرين في مخيم اللاجئين بشكل مستمر لغرض متابعة حالاتهم النفسية وتعزيز قدراتهم على التكيف طيلة فترة هجرتهم.

Abstract:

Most of immigrants suffer from severe types of psychological disturbances, such as depression and anxiety as a result of the exposure to markedly stressful life events. The present study was conducted from April 2nd, 2008 through October 2nd, 2008.

Objectives: This study aims to assess the psychosocial disturbances of immigrants in AL-Najaf refugee camp.

Methodology: A non probability sampling of 100 immigrants who were living in AL-Najaf refugee camp from 2006 – 2008, because of the security situation in Iraq. A questionnaire was constructed to achieve the study objectives; it consists of three major parts with 40 items. These parts are the demographic characteristics, psychological aspects (depression and anxiety), and social aspects. To determine the reliability and the validity of the questionnaire, the pilot study was done and the questionnaire was reviewed by group of experts. Data were collected through interview as a mean of data collection. Data were analyzed through a descriptive statistical analysis (percentage and frequencies) and inferential statistical analysis.

Results: The findings of the study indicated that there was a severe psychological distress and poor social aspects among immigrants; In addition, there was a significant relationship between the psychological aspects (depression and anxiety) and social aspects. Moreover, there is a significant relationship between the psychological aspects with age, occupation, and family member.

Conclusion: The study concluded that immigrants were inflicted with psychological disturbances at different levels; most of them are at a poor level of social aspects.

Recommendations: The study recommends that early attention from social institutions and the Mistry of Health to address immigrants' to prevent psychological illnesses among immigrants. Also, create a mental health team to continuously visiting the immigrants in the refugee camp to evaluate their psychological health and reinforce their adaptive abilities during the migration period.

Key words: psychosocial, immigrants, AL-Najaf, refugee camp.

INTRODUCTION:

Migration is not a new phenomenon; it has a very long history extended to hundreds of years. Migration is defined as “a process of social change where an individual, alone or accompanied by others, because of one or more reasons of economic betterment, political upheaval, education or other purposes, leaves one geographical area for prolonged stay or permanent settlement in another geographical area ⁽¹⁾. Immigration has conceptualized the immigrants’ adaptation to new cultural and social environment as a multidimensional process involving different patterns and strategies. From a broad perspective, adaptation is a process of change and adjustment to new environmental conditions ⁽²⁾.

Most immigrants experience stressful challenges during the adaptation to the host culture, (e.g. socioeconomic, discrimination, and marginalization). These challenges inhibit their acculturation to a new society and cause a culture shock; therefore, negatively influencing their mental well-being. Researchers indicated that the greater the challenges, the poorer the acculturation and the poorer mental health ⁽³⁾. The Psychological adaptation has considered an important issue for immigrants' health; most immigrants suffer from higher levels of emotional distress and poorer mental health than those of host populations. Moreover, Poor adaptation patterns among immigrants relate to increased levels of depression, anxiety, low self-esteem, and other psychological problems ^(4,5).

Migration and resettlement stressful challenges negatively influence the psychological well-being of the immigrants ⁽⁶⁾. Furthermore, despite the potential magnitude of the problem, the psychosocial health of migrant's remains poorly addressed and little is known about the dynamics involved or about what should be done to prevent or manage mental health problems related to migration⁽⁷⁾.

OBJECTIVES:

1. To assess the psychosocial aspects of immigrants in AL-Najaf refugees camp.
2. To determine the relationship between the psychosocial aspects and some demographical characteristics, such as age, gender, educational levels, occupations, marital status, income, immigration period, and family member.

METHODOLOGY:

A descriptive-analytic study was conducted on immigrants from April 2nd 2008 to May 2nd 2008 to achieve the early stated objectives. Immigrants were selected from AL-Najaf refugee camp which located in AL-Najaf governorate. This camp contains approximately (750) immigrant came from different Iraqi cities. A purposive (Non-probability) sample of (100) immigrants were selected according to the following criteria: Both sexes male and female aged from 18 year to over 67 years, Immigrants were free from any psychiatric disorders, and they migrated voluntarily and involuntarily from different cities.

The questionnaire was consisted of three parts which are distributed as follows.(part I), this part includes the demographic characteristics of the sample and consists of (8) items including age, gender, the levels of education, marital status, occupation, monthly income, immigration period, and family members. Part II consists of 25 items measuring the psychological status, 15 items assess symptoms of depression and the other 10 items assess symptoms of anxiety. Part III, this part consists of 15 items measuring the social status of immigrants. These items were rated according to three Likert rating scale (never 1, sometimes 2, and always 3). The severity of the psychosocial disturbances is measured by scoring the psychosocial levels as follows.

1. Depression: The minimum score is 15 and the maximum score is 45.
 - (Mild (15 – 24)
 - Moderate (25 – 34)
 - Severe (35 – 45)

2. Anxiety: The minimum score is 10 and the maximum score is 30.

- Mild (10 – 15)
- Moderate (16 – 22)
- Severe (23 – 30)

3. Social aspect: The minimum score is 15 and the maximum score is 45.

- Good (15 – 24)
- Intermediate (25 – 34)
- Weak (35 – 45)

Statistical Analysis:

The data of the present study were analyzed through the descriptive statistical analysis (percentage and frequencies) and the inferential statistical analysis (Chi-Square and Correlation Coefficient).

RESULTS:

Table 1: Demographic characteristics of the study sample.

List	Demographic characteristics		No	%	List	Demographic characteristics		No.	%
1.	Gender	Male	63	63.0	5.	Monthly Income	Sufficient	0	0.0
		Female	37	37.0			Barely Sufficient	8	8.0
2.	Age / Year	18 – 27	32	32.0	6.	Family Member	1 – 3 Persons	12	12.0
		28 – 37	25	25.0			4 – 6 Persons	52	52.0
		38 – 47	10	10.0			7 – 9 Persons	26	26.0
		48 - 57	21	21.0			10 and more	10	10.0
		58 – 67	12	12.0					
3.	Marital Status	Single	26	26.0	7.	Immigration Period	1 year	19	19.0
		Married	54	54.0			2 year	32	32.0
		Divorced	7	7.0			3 year	26	26.0
		Widowed	13	13.0			4 year	23	23.0
		Separated	0	0.0					
4.	Level of Education	Illiterate	12	12.0	8.	Occupation	Official	0	0.0
		Primary School	32	32.0			Breadwinner	11	11.0
		Intermediate School	26	26.0			Retired	2	2.0
		Secondary School	20	20.0			House Wife	22	22.0
		Institute or college	9	9.0			Jobless	65	65.0
		Post graduate	1	1.0					

Table (1) Shows that (32%) of the sample at age group (18- 27) years, majority of the sample males (63%). In regards to educational levels, (32%) were at a primary level and (26%) were intermediate level. (54%) of the study sample were married, (65%) jobless, (92%) were not Sufficient income, (52%) had 4-6 family members, and (32%) had two years period of immigration.

Table 2- Distribution of the sample according to the psychological aspects.

Psychological Levels	Depression		Anxiety	
	No.	%	No.	%
Mild	1	1.0	2	2.0
Moderate	14	14.0	28	28.0
Severe	<u>85</u>	85.0	<u>70</u>	70.0
Total	100	100.0%	100	100.0%
M.S. = 2.53			M.S. = 2.54	

This table shows the prevalence of psychological problems among immigrants; the highest percent of the sample (85.0%) has severe depression; (70.0%) of the sample has sever anxiety.

Table 3- distribution of the sample according to the psychosocial Problems

Problems Level	Psychological		Problems Level	Social	
	No.	%		No.	%
Mild	3	3.0	Good	0	0.0
Moderate	30	30.0	Intermediate	18	18.0
Sever	<u>67</u>	67.0	Weak	<u>82</u>	82.0
Total	100	100.0%	Total	100	100.0%
M .S. =2.539			M.S. = 2.585		

This table shows that the highest percentage (67.0%) of the total sample has severe level of psychological Problems and (82.0%) has weak social level. The lowest percentage is (3.0%) of the total sample has mild level of psychological Problems. Moreover, no one has a good social level. The mean scores are (2.539) for the psychological problems and (2.585) for the social aspects.

Table 4: Relationship between psychosocial problems and age group.

Psychosocial Age groups	Psychological								Social					
	Mild		Moderate		Sever		Total		Intermediate		Weak		Total	
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
18-27	3	3.0	12	12.0	17	17.0	32	32.0	10	10.0	22	<u>22.0</u>	32	32.0
28-37	0	0.0	5	5.0	<u>20</u>	<u>20.0</u>	25	25.0	3	3.0	<u>22</u>	22.0	25	25.0
38-47	0	0.0	0	0.0	10	10.0	10	10.0	0	0.0	10	10.0	10	10.0
48-57	0	0.0	13	13.0	8	8.0	21	21.0	2	2.0	19	19.0	21	21.0
58-67	0	0.0	0	0.0	12	12.0	12	12.0	3	3.0	9	9.0	12	12.0
Total	3	3.0	30	30.0	67	67.0	100	100%	18	18.0	82	82.0	100	100%
$\chi^2 = 29.278$ $df = 8$ $p = 0.001$									$\chi^2 = 8.032$ $df = 4$ $p = 0.90$					

The results of table 4 present that (20%) of the study sample have sever psychological problems at age 28- 37 years old, and (22%) of the study samples have week social level at age 18-27 years old. There is a significant relationship only between psychological problems and age group.

Table 5- Relationship between psychosocial problem and gender group.

Aspect Gender	Psychological								Social					
	Mild		Moderate		Severe		Total		Intermediate		Weak		Total	
	No.	%	No	%	No	%	No	%	No	%	No	%	No	%
Male	0	0.0	18	18.0	45	<u>45.0</u>	63	63.0	12	12.0	51	<u>51.0</u>	63	63.0
Female	3	3.0	12	12.0	22	22.0	37	37.0	6	6.0	31	31.0	37	37.0
Total	3	3.0	30	30.0	67	67.0	100	100.0	18	18.0	82	82.0	100	100%
$\chi^2 = 5.722$ $df = 2$ $p = 0.57$									$\chi^2 = 0.127$ $df = 1$ $p = 0.722$					

The results of table 5 present that males with severe psychological problems constitute (45%) of the study sample and (51%) of the study sample are males with weak social level. There is no significant relationship between psychosocial aspects and gender.

Table 6- Relationship between psychosocial problems and marital status of immigrants.

Aspects	Psychological								Social					
	Mild		Moderate		Severe		Total		Intermediate		Weak		Total	
	No	%	f	%	f	%	F	%	f	%	f	%	f	%
Single	1	1.0	11	11.0	14	14.0	26	26.0	6	6.0	20	20.0	26	26.0
Married	2	2.0	16	16.0	36	<u>36.0</u>	54	54.0	12	12.0	42	<u>42.0</u>	54	54.0
Divorced	0	0.0	0	0.0	7	7.0	7	7.0	0	0.0	7	7.0	7	7.0
Widowed	0	0.0	3	3.0	10	10.0	13	13.0	0	0.0	13	13.0	13	13.0
Total	3	3.0	30	30.0	67	67.0	100	100%	18	18.0	82	82.0	100	100%
$\chi^2 = 6.375$ df= 6 p = 0.382									$\chi^2 = 5.496$ df= 3 p = 0.139					

This table shows that married immigrants constitute (36%) of the study sample with sever psychological problems and (42%) with weak social level. There is no significant relationship between psychosocial aspects and marital status.

Table 7- Relationship between psychosocial problems and educational levels.

Aspects	Psychological								Social					
	Mild		Moderate		Severe		Total		Intermediate		Weak		Total	
	f	%	f	%	f	%	f	%	f	%	f	%	f	%
Illiterate	0	0.0	7	7.0	5	5.0	12	12.0	1	1.0	11	11.0	12	12.0
Primary	3	3.0	9	9.0	20	20.0	32	32.0	8	8.0	24	<u>24.0</u>	32	32.0
Intermediate	0	0.0	4	4.0	22	<u>22.0</u>	26	26.0	5	5.0	21	21.0	26	26.0
Secondary	0	0.0	7	7.0	13	13.0	20	20.0	0	0.0	20	20.0	20	20.0
Institute or college	0	0.0	2	2.0	7	7.0	9	9.0	4	4.0	5	5.0	9	9.0
High school	0	0.0	1	1.0	0	0.0	1	1.0	0	0.0	1	1.0	1	1.0
Total	3	3.0	30	30.0	67	67.0	100	100%	18	18.0	82	82.0	100	100%
$\chi^2 = 61.745$ df= 10 p = 0.080									$\chi^2 = 10.723$ df= 5 p = 0.057					

The results of table 7 present that (22%) of the study sample have sever psychological problem at intermediate school, and (24%) of the study sample have week social level at primary school. There is no significant relationship between psychosocial problems and educational level among immigrants.

Table 8- Relationship between psychosocial problems and occupation.

Aspects Occupation	Psychological								Social					
	Mild		Moderate		Severe		Total		Intermediate		Weak		Total	
	No	%	No	%	No	%	No	%	No	%	No	%	No	%
Official	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
Breadwinner	0	0.0	2	2.0	9	9.0	11	11.0	1	1.0	10	10.0	11	11.0
Retired	1	1.0	0	0.0	1	1.0	2	2.0	1	1.0	1	1.0	2	2.0
Housewife	2	2.0	6	6.0	14	14.0	22	22.0	6	6.0	16	16.0	22	22.0
Jobless	0	0.0	22	22.0	43	43.0	65	65.0	10	10.0	55	55.0	65	65.0
Total	3	3.0	30	30.0	76	76.0	100	100%	18	18.0	82	82.0	100	100.0
$\chi^2 = 21.705$ df= 6 p = 0.001									$\chi^2 = 3.562$ df=3 p = 0.313					

The results of table 8 present (43%) of the total sample are jobless immigrants with severe level of psychological problems, and (55%) have week social level. This table shows that there is a significant relationship only between psychological problems and occupation.

Table 9- Relationship between psychosocial problems and monthly income.

Aspects Income	Psychological								Social					
	Mild		Moderate		Severe		Total		Intermediate		Weak		Total	
	No	%	No	%	No	%	No	%	No	%	No	%	No	%
Sufficient	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
Barely Sufficient	0	0.0	5	5.0	3	3.0	8	8.0	0	0.0	8	8.0	8	8.0
Not Sufficient	3	3.0	25	25.0	64	64.0	92	92.0	18	18.0	74	74.0	92	92.0
Total	3	3.0	30	30.0	67	67.0	100	100%	18	18.0	82	100.0	100	100%
$\chi^2 = 4.452$ df= 2 p = 0.108									$\chi^2 = 1.909$ df=1 p = 0.167					

This table shows that (64%) of the total sample has severe psychological aspect at not sufficient monthly income, and (74%) has weak social level also at not sufficient monthly income. There is no significant relationship between psychosocial aspects and monthly income

Table 10 – Relationship between psychosocial Problems and migration period.

Aspects migration period	Psychological								Social					
	Mild		Moderate		Severe		Total		Intermediate		Weak		Total	
	No	%	No	%	No	%	No	%	No	%	No	%	No	%
One year	0	0.0	4	4.0	15	15.0	19	19.0	3	3.0	16	16.0	19	19.0
Two years	3	3.0	13	13.0	16	16.0	32	32.0	10	10.0	22	22.0	32	32.0
Three years	0	0.0	7	7.0	19	<u>19.0</u>	26	26.0	2	2.0	24	<u>24.0</u>	26	26.0
Four years	0	0.0	6	6.0	17	17.0	23	23.0	3	3.0	20	20.0	23	23.0
Total	3	3.0	30	30.0	67	67.0	100	100%	18	18.0	82	82.0	100	100%
$\chi^2 = 10.378$ df= 6 p = 0.110								$\chi^2 = 6.124$ df=3 p = 0.106						

This table shows that immigrants with three years migration period constitute (19%) of the study sample with severe psychological problems, and (24%) in weak social level. This results present that there is no significant relationship between psychosocial problems and period of migration.

Table 11 –Relationship between psychosocial problems and number of family members.

Aspects Family member	Psychological								Social					
	Mild		Moderate		Severe		Total		Intermediate		Weak		Total	
	No	%	No	%	No	%	No	%	No	%	No	%	No	%
1-3 person	0	0.0	11	11.0	1	1.0	12	12.0	4	4.0	8	8.0	12	12.0
4-6 person	1	1.0	8	8.0	43	<u>43.0</u>	52	52.0	9	9.0	43	<u>43.0</u>	52	52.0
7-9 person	2	2.0	8	8.0	16	16.0	26	26.0	4	4.0	22	22.0	26	26.0
10 and more	0	0.0	3	3.0	7	7.0	10	10.0	1	1.0	9	9.0	10	10.0
Total	3	3.0	30	30.0	67	67.0	100	100%	18	18.0	82	82.0	100	100%
$\chi^2 = 29.893$ df= 6 p = 0.01								$\chi^2 = 2.482$ df=3 p = 0.478						

The results of table 11 shows that (43%) of the study sample have severe psychological problems at family members (4-6 persons), and (43%) has weak social level at the same family member group. This table reveals that there is a significant relationship between psychological problems and family member.

DISCUSSION:

1. Discussion of Psychological Problems (Depression, Anxiety).

The study results (table 2) represent that depression is highly prevalence among immigrants, (85%) of those immigrants live with severe level of depression followed by moderate depression which constitute (14%). This result supported by Bhugra et al., (2004), they mentioned that immigrants usually demonstrate higher prevalence of common mental disorders, especially depression than those of host societies⁽⁸⁾. Fenta et al., (2004) studied the rate of depression disorder of Ethiopian immigrants and refugees in Toronto. They stated that the prevalence of depression among Ethiopian immigrants was about three times higher than its prevalence among Southern Ethiopians⁽⁹⁾. Moreover, Mills and Henretta (2001) said that any changes in a family environment, specially the persons who have interpersonal relationship with the surrounding and people around them increase the risk of developing a mood disorder⁽¹⁰⁾. The results of table (2) also revealed that (70%) of immigrants inflicted with severe anxiety level. This study supported by Steiner et al., (2007) who studied the symptoms of self-reported anxiety, sleeping problems, and severe pain among Turkish-born immigrants in Sweden. They reported that the risks for self-reported anxiety, sleeping problems and severe pain are significantly increased among Turkish-born immigrants, even after controlling socio-economic status, such as education, marital status, and employment⁽¹¹⁾. Robert et al., (2002) found out that anxiety disorder was the most common psychological distress among Vietnamese immigrants, especially simple and social phobias⁽¹²⁾.

2. Discussion of General Psychosocial Problems.

This study indicated in table (3) that (67%) of the immigrants have severe level of psychological problems. This result is supported by Mills and Henerlta (2001) in which they focus on the psychological health of the immigrants. They pointed out that there is a strong connection between living arrangements and family life with psychological health⁽¹⁰⁾. This result also revealed that most immigrants live in a poor social level. Joseph and Cristina (2000) mentioned that most immigrants experience stressful challenges, such as losing interaction with family and friend, absence of social and financial support, difficult adjusting to a new setting, and cultural differences; therefore, these challenges negatively influence their acculturation to the host culture⁽¹³⁾.

3. Discussion of the Psychological problems Related to the Immigrants' Demographics.

This result of table (4) revealed that there is a significant relationship between psychological problems (depression and anxiety) and age group. It represents that (20%) of immigrants aged (28-37) years old have severe psychological disturbances. According to Joseph and Cristina (2000), comparing with other age groups, middle-aged immigrants are more likely to have severe level of psychological distress⁽¹³⁾. Haile et al., (2004) studied the prevalence of psychological disorders among Ethiopian immigrants. They found out that young age immigrants are more vulnerable to psychological distress than other age groups⁽¹⁴⁾. Furthermore, the result also showed a highly significant relationship between psychological disturbances and gender group. It indicated that males constitute (45%) of the study sample who are inflicted with severe level of psychological disturbance; while, females constitute (22%). This study supported by Amado et al. (2003); they examined the psychosocial stressor experienced by Mexican immigrants. They found that half of them were males and scored higher on a measure of depression than were women⁽¹⁵⁾.

The result of table (6) shows that married immigrants are more likely to have severe level of mental problems; they constitute (36%) of the total study sample. This result supported by Noori and Janet (2007); they mentioned that the highest rate of psychological problems was seen among people living with their married partners⁽¹⁵⁾. This study also shows that (22%) of the immigrants who suffer severe psychological problems are in the intermediate educational level (table7). Noori and Jamel (2007) found out that the highest rate of psychological disturbances based on the level of education is seen among immigrants with less than secondary school⁽¹⁶⁾. Moreover, table (8) represents that (43%) of immigrants with severe psychological distress are jobless. This result match the study results that was done Raza et al.(2006). Researchers found out that Pakistanian immigrants had low mental outcomes due to the socioeconomic and employment issues⁽¹⁷⁾. In 2006, Kennedy and McDonald studied the effects of unemployment related stresses on immigrants'

mental well-being. They stated that “unemployment, and especially a long duration of unemployment is found to be associated with poor mental health”⁽¹⁸⁾.

In addition to these results, table (9) shows that (64%) among those of not sufficient monthly income afflicted with severe level of psychological disturbance. Wilson (2001) study proclaimed that there is a strong correlation between socio-economic status and the prevalence of mental health problems among immigrants⁽¹⁹⁾. Guarnaccia et al., (2005) studied the prevalence of psychiatric disorders among Hispanic immigrants. They pointed out that lack of job mobility and economic decline are stressful challenges that most immigrant experience, therefore, negatively influence their psychological well-being⁽²⁰⁾. Moreover, the finding represents that, immigrants who have longer period of migration have sever psychological disturbances than those with shorter period. This result is supported by Aroian (2003) who found that psychological distress, especially depression may not decrease over time, because of immigrants’ demands increase overtime⁽²¹⁾. Researcher’s personal view, regarding first year of displacement and it's relatively incongruent decreased psychological problems’ score, it can be explained that temporary relief experienced by immigrants is happened as a result of avoiding primary unsafe area. Overtime, immigrants start to suffer from the circumstance that they face in the new host. Finally, the result of table (11) shows that (43%) of those who live with family of (4 – 6 persons) have severe levels of psychological disorders. This study agrees with Rose, (2008) who stated that psychological distress is increased among immigrants who live with large families is because these family members usually live together in a small place that lack of water and other necessary facilities, therefore, immigrants’ physical and psychological health is negatively affected⁽²²⁾.

4. Discussion of the Social Problems.

The present study shows that most immigrants have experienced stressful challenges and life events than other populations as a result of the enormous changes in their residency, social relationships and support, and vocational and familial life. Therefore, they are living in a poor social level and highly vulnerable to variety of social problems. Miranda et al.(2005) proclaimed that the risk of having psychological problems such as depression and anxiety increases among immigrants when they are separated from their relatives, especially women separated from their children⁽²³⁾. Louise (2005) pointed out that social relationships and support may vary between genders, however, they are extremely important in minimizing psychosocial distress⁽²⁴⁾. Similarly, Akhaven et al.(2004) indicated that social support improve immigrants’ acculturation and helps providing individuals with a sense of belonging and identity; however, social problems and ineffective social support was strongly correlated to the high levels of anxiety and depression among immigrants⁽²⁵⁾.

CONCLUSION:

Most of the immigrants are affected by severe psychological distress (depression and anxiety). Those immigrants have lived at poor social level. Young age immigrants with low education and low income are more likely to be vulnerable to psychosocial disturbances. There are gender differences in response to psychosocial stresses.

RECOMMENDATIONS:

The present study recommends that early attention from social institutions and the Ministry of Health to address immigrants’ to prevent psychological illnesses among immigrants. Also, create a mental health team to continuously visiting the immigrants in the refugee camp to evaluate their psychological health and reinforce their adaptive abilities during the migration period.

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