

Post-Migration Stress and Psychological Well-Being among Asylum Seekers in the Direct Provision Centres in Dublin, Republic of Ireland

By

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Abstract

The global phenomenon of migration has brought to light various challenges faced by individuals seeking asylum in foreign countries. Among these challenges includes post-migration stress that stands out as a significant concern impacting the psychological well-being of asylum seekers. This study, conducted in Dublin, Republic of Ireland, aimed to delve into the dynamics of post-migration stress among asylum seekers housed in direct provision centers, focusing particularly on gender differences and strategies for mitigating stressors. The theoretical framework guiding this study was the transactional theory of stress proposed by Lazarus and Folkman (1984), which posits that stress arises from an individual's appraisal of their environment and their ability to cope with it. Additionally, the study drew upon Carol Ryff's (1989) theory of psychological well-being, which emphasizes the importance of autonomy, environmental mastery, personal growth, positive relations with others, purpose in life, and self-acceptance for overall well-being. Employing a quantitative correlational design, the study gathered data from 345 asylum seekers through simple random sampling. Both descriptive statistics (mean and standard deviation) and inferential statistics (independent sample t-test and ANOVA analysis) were utilized to analyze the quantitative data, while qualitative data underwent content analysis using thematic analysis. The findings illuminated several stressors commonly experienced by asylum seekers post-migration. Language barriers, financial concerns, separation from family, and difficulties adapting to a new environment emerged as significant contributors to stress levels. Notably, gender did not appear to significantly influence the experience of post-migration stress among asylum seekers, indicating a universal vulnerability to stressors irrespective of gender. However, despite the lack of discernible gender differences in stress levels, it is imperative to recognize the potential for gender-specific stressors to impact asylum seekers differently. Therefore, the study recommends that stress mitigation policies be tailored to address these gender-specific stressors, particularly within the context of direct provision centers. Direct provision centers, serving as temporary accommodation for asylum seekers, present a unique environment where stressors may manifest differently for men and women. For instance, women may face additional challenges related to childcare responsibilities, reproductive health care, or gender-based violence, which could exacerbate their stress levels. Thus, targeted interventions focusing on these specific stressors can help alleviate the burden of post-migration stress and promote the psychological well-being of asylum seekers. The study concluded that recognizing and addressing the nuanced nature of post-migration stress among asylum seekers is important.

Key words: Migration, Stress, Depression, Asylum, Dublin, Republic of Ireland

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1.0 Introduction and Background

Leaving one's own country involves a number of losses. Most people have to leave their families, society, and even territory. Such experiences impact the psychological well-being of asylum seekers, who are forced to leave their country. While leaving one's country may be stressful, entering another country and adjusting may generate more stress. Understanding the interaction between post-migration stress (PMS) and psychological well-being may provide insights into different interventions for asylum seekers, which is the main purpose of this study.

Amnesty International (2022) posited that an asylum seeker is a person who has left their country and is seeking protection from persecution and serious violations of human rights in the host country. The definition continues that such a person, an asylum seeker, has not been legally recognized as a refugee and is waiting to be assigned refugee status based on the decision on their asylum claim. A refugee, on the other hand, is a person who has fled from their own country because he is at risk of persecution or gross human rights violations (Amnesty International, 2022). As such, most asylum seekers aspire to gain refugee status.

On a global scale, numerous studies have been done to show the impact of PMS on PWB or the relationship between PMS and PWB. Li, Liddell, and Nickerson (2016) stated in their study that in as much as pre-migration stress is recognized as a key attribute to mental health among asylum seekers and refugees, post-migration stressors do contribute significantly to the deterioration of the psychological well-being of refugees and asylum seekers. Their study further revealed that key post-migration stressors include socio-economic, social, and interpersonal factors, as well as the asylum-seeking process, which in most countries can be quite hectic. In Europe, Hajak et al. (2021) reported that since 2015, approximately five million people have sought asylum in European countries. The researchers, who sought to investigate factors affecting the mental health and psychological well-being of asylum seekers and refugees, focused their study on Germany. The researchers revealed that, indeed, there is a high rate of psychological distress among asylum seekers and refugees in Germany and Europe, by extension. They further revealed that the key factors attributing to post-migration stress include uncertain asylum status, living in provision centres, and separation from a nuclear family, language barrier, and discrimination.

In Ireland, the European Council on Refugees and Exiles, along with statistics from the Asylum Information Database, report that by the end of February 2023, the number of asylum seekers in Ireland stood at slightly over 13,300 people. In Ireland, asylum seekers are provided accommodation at direct provision centres. Direct provision centres are usually hotels or hostels that are paid to provide accommodation to asylum seekers. Data from the Asylum Information Database reports that there are close to 1057 direct provision centres in Ireland whose current occupancy is 19,240 persons. This number greatly differs from the number of asylum seekers

stated above, as provision centres also house refugees. On average, an asylum seeker can be housed at direct provision centres for approximately three years. However, it is common that this period exceeds five years (Asylum Information Database, 2023).

Feyissa et al. (2022) defined post-migration stress as any form of stress experienced by people who have already left their home country for another due to the challenges they find in the new environment. In the current study, it will mean any form of psychological distress experienced by asylum seekers in the host nation. According to Sengoelge et al. (2022), the main causes of PMS among asylum seekers can be attributed to social, financial, and competency strains and discrimination. Generally, moving from one country to another, in the context that puts one as an asylum seeker, is marred by factors such as being split from one's family and society, having no employment, and discontinuation of education. It is such factors, compounded by having to settle in a new environment, along with a different culture, that cause stress among asylum seekers. It is these PMS, as Bogic et al. (2015) reported, that cause asylum seekers' mental health issues.

Psychological Well-being (PWB) is a state of mental wellness in which a person experiences a positive state of mental health (Amnesty International, 2022). Similarly, Alexander et al. (2021) also posit that PWB is used to describe an individual's emotional and mental health and overall functioning. According to Amnesty International (2022), PWB comprises having a positive relationship with others, environmental mastery, autonomy, having a purpose in life, and self-acceptance. In the current study, PWB will mean resilience based on various experiences of autonomy, environmental mastery, personal development, purposeful life, and positive interpersonal relations. According to Kubzansky et al. (2018), PWB is important as studies have shown that if one has a higher PWB, they are more likely to have a longer and healthier life.

In reviewing PWB, Warr (1978) noted that among the factors affecting PWB include infancy and early childhood occurrences, individual attributes and behaviours, social and economic circumstances, environmental factors, and personality issues. In relation to this study, factors such as personality, along with social and economic factors, are responsible for affecting the PWB of asylum seekers. As such, exposure to PMS, as witnessed by asylum seekers, is what affects their PWB.

In Ireland, for instance, O'Connell, Duffy, and Crumlish (2016) reported that there is substantial evidence indicating that asylum seekers in Ireland experience an elevated level of mental illness as compared to the general population. These sentiments were echoed by Bogic et al. (2015), who noted that asylum seekers are 15 times more likely to be diagnosed with post-traumatic stress disorder (PTSD) or depression. This is a classic example where the PWB of asylum seekers is affected by the PMS they are experiencing.

Based on the above view, this study main aim is to determine the relationship between post-migration stress and psychological well-being among asylum seekers in Dublin in the Republic of Ireland.

2.0 Statement of the Problem

It is the right of every person, regardless of their immigration status, gender, or race, to experience a complete state of well-being. However, this is seldom the case. At the very onset, it is important to note that due to the nature of their presence in the host country, most asylum seekers are there because of factors or situations that are beyond their control and, often, not in

their favour. That, in itself, is already a cause of distress. They then encounter other factors, such as social and financial challenges, along with discrimination that compounds the stress they are already going through. This significantly affects their PWB. Several studies have, thus far, been done to explore the impact of post-migration stress on the psychological well-being of asylum seekers. Li et al. (2016), for instance, noted that while most asylum seekers are already exposed to pre-migration stress in their home or country of origin, the socioeconomic and sociocultural factors in the host country often exacerbate the stress levels of the asylum seekers after migration. Further, interpersonal issues, as well as the laborious process of seeking asylum, compound the already stressful condition. Most studies on the PMS on PWB have largely been done globally. Few studies have, thus far, been done in Ireland.

Among the notable studies in North Ireland include that of Murphy and Vieten (2022), which confirmed that, indeed, post-migration stress is significantly higher among asylum seekers and that it is associated with increased levels of poor psychological well-being. Further, the study by Murphy and Vieten (2022) is among the first studies in Northern Ireland that have distinctively distinguished asylum seekers from refugees, a fundamental aspect that most similar studies in the past have ignored. Given the limited number of local studies, this research was designed as one of the studies that seeks to fill the gap. The findings of the study shall go a long way in providing more information on the psychological well-being of the asylum seekers and help with the formulation or development of policies that would elevate the mental health of asylum seekers in Northern Ireland.

3.0 Objective and Research Question

3.1 General Objective

The study general objective is to determine the relationship between post-migration stress and psychological well-being among asylum seekers in Dublin in the Republic of Ireland.

3.2 Specific Study Objectives

- i. To determine the levels of post-migration stress among asylum seekers in direct provision centres in Dublin, Republic of Ireland
- ii. To establish whether there are statistically significant gender differences in the levels of post-migration stress among asylum seekers in the direct provision centres in Dublin, Republic of Ireland.
- iii. To establish the relationship between post-migration stress and psychological well-being among asylum seekers in direct provision centres in Dublin, Republic of Ireland.
- iv. To assess strategies for minimizing the post-migration stress among asylum seekers in direct provision centres in Dublin, Republic of Ireland.

3.3 Research Questions

- i. What are the levels of post-migration stress among asylum seekers in direct provision centres in Dublin, Republic of Ireland?
- ii. Are there statistically significant gender differences in the levels of post-migration stress among asylum seekers in the direct provision centres in Dublin, Republic of Ireland?

- iii. What is the relationship between post-migration stress and psychological well-being among asylum seekers in direct provision centres in Dublin, Republic of Ireland?
- iv. What are the strategies for minimizing the post-migration stress among asylum seekers in direct provision centres in Dublin, Republic of Ireland?

4.0 Literature Review

4.1 Level of Post-Migration Stress among Asylum Seekers

The level of post-migration stress among asylum seekers has been measured in different studies, although most of the studies do not focus on refugees. A cross-sectional study by Tinghog et al. (2017) assessed the prevalence and associations between anxiety, depression, post-traumatic stress disorder (PTSD), low subjective well-being, potential traumas, and post-migration stress. In a random sample of 1,215 participants from Syria aged between 18-64 years, analysis of the data showed that the participants met the criteria for mental ill health, with 40.2% qualifying for depression, 37.7% for low subjective well-being, 31.8% for anxiety, and 29.9% for PTSD. All these are stress-related disorders, but the study on the stress level was not exclusively studied.

Another cross-sectional study by Sengoelge et al. (2022) assessed the relationship between post-migration stressors and health-related quality of life in refugees from Syria and resettled in Sweden. The study sampled 1215 participants using random sampling in 2016. The health-related quality of life (HRQoL) was measured against post-migration stressors. Most refugees (62%) reported high levels of depression, 55% pain, and discomfort. The study only assessed depression levels rather than post-migration stress.

Feyissa et al. (2022) conducted a cross-sectional study to examine the association between post-migration life adversity (PMLA), mental health, and resilience in South Korea. The study sampled 219 asylum seekers and 42 refugees through a stratified random sample. The descriptive analyses indicated a total mean of 3.82 (SD= 1.380) – 4.59 (SD= 0.931), which meant a high level of PMLA for both asylum seekers and refugees. However, for the asylum seekers alone, the mean stood between 3.90 (SD = 1.28) and 4.59 (SD = 0.875), which was still high. Although this is not directly post-migration stress, it still indicates a high level of stressors, some of which may be linked to PMS.

Tippens et al. (2021) assessed the prevalence of psychological distress and associated stressors among urban-displaced Congolese adults aged 18-80 in Kenya. The study was cross-sectional and used snowball sampling to select 245 participants, and data was collected using a self-reporting questionnaire. The findings showed that 52.8% of the participants had symptoms of psychological distress which was related to the participants' roles in the community or the family, confusion, ambivalence, fear of seeking medical care when sick, and lack of legal status as a refugee. This study shows the experiences that refugees face and can apply to asylum seekers, but it only measured psychological distress.

While some studies have focused on the levels of stress, depression, and psychological distress, others have focused on the most stressful factors experienced by asylum seekers. In a systematic review, Gleeson et al. (2020) assessed the effect of post-settlement stressors and how they impact PTSD, anxiety, and depression among asylum-seeking and refugee populations in Europe. The study found that the length of time during the asylum procedure was the greatest post-migration stressor, with those whose procedure takes over six months being more stressed (62%) compared to those below six months (42%). The second stressor was residency status,

third family, fourth social integration, and weak social network. This study only identified the post-migration stressors through a systematic review, which may lack the PMS levels.

In a quantitative survey by Murphy and Vieten (2020), the post-migration stressors among asylum seekers in Northern Ireland were assessed. The study targeted asylum seekers, refugees, and new United Kingdom (UK) citizens who were administered semi-structured interviews. The study found that the Northern Ireland asylum system negatively impacted them because of the crucial support in accessing mental health in the country.

4.2 Gender Differences in Post-Migration Stress among Asylum Seekers

Alexander et al. (2021) studied the post-migration stressors and subjective well-being of adult Syrian refugees resettled in Sweden from a gender perspective. The study was cross-sectional, and it randomly sampled 1215 respondents. Data was gathered using different questionnaires for different constructs indicative of post-migration stress and subjective well-being. The findings indicated that different stressors impacted the refugees differently according to gender. Significant gender differences in PMS were found, with the male gender experiencing higher levels of the same compared to the female.

While the previous study focused on adult refugees, Mohwinkel et al. (2018) set out to study the gender differences in the mental health of unaccompanied refugee minors in Europe through a systematic review where nine studies were identified. The study found a significant gender difference in post-traumatic stress and depression. Female unaccompanied minors were found to experience more post-traumatic stress compared to their male counterparts. There were no significant differences in terms of anxiety among the same group. This study did not focus on post-migration stress but on post-traumatic stress, depression, and anxiety, which may be outcomes of post-migration stress.

Jarallah and Baxter (2019) also studied the gender differences and psychological distress among humanitarian migrants in Australia and the moderating role of the migration pathway. The study utilized data accumulated from a migrant population, where a total of 2399 participants were selected randomly. The findings, among others, showed that women experienced significantly higher psychological distress than men. While distress may be classified as negative stress, it may not fully qualify as post-migration stress as intended in the current study. Similar to Jarallah and Baxter (2019), Walther et al. (2019) studied the prevalence of psychological distress in a refugee population in Germany and compared it with Germany's factors amenable policies for intervention and integration. The study was cross-sectional, and it gathered 2639 participants through random sampling. The findings showed mild, moderate, and severe levels of psychological distress at 41.2%, 10.9%, and 53.0%, respectively. The distress was higher among female refugees at 53.5% for females and 70.4% for older adults aged 55 years and above. This study also informed more of psychological distress rather than post-migration stress.

Studies on post-migration stress among asylum seekers are limited in the Irish context. However, Murphy et al. (2021) studied the embodied experiences of mental distress among African asylum seekers receiving mental healthcare in Ireland. The study applied holistic analysis of the narrative data collected from the participants who had been sampled purposively. The study found that the mental distress of the asylum seekers was interwoven with physical, psychological, emotional, and social realms, thus impacting their whole lives. The impact of the

mental distress was numbed feelings, reduced social interaction, and attempted suicide. The study did not show the differences but the experiences.

Cetrez et al. (2021) conducted a public mental health study among Iraqi refugees in Sweden. The aim was to understand their health, resilience, and acculturation in relation to their gender differences. The study used a descriptive approach in which convenience sampling was used to select 4010 participants. Data were collected using standardized tools for resilience, general health, PTSD, and acculturation. The findings revealed gender differences in the different measures, including PTSD, which may relate closely to post-migration stress. This study provides useful information on gender in PMS, although it cannot be directly linked.

In a local cross-sectional study by Collins et al. (2022), the health and quality of Syrian refugees were assessed. The study utilized a random sample of 194 participants from whom data was collected using a self-reported health questionnaire. Descriptive and regression analysis were the main measures of the data. The findings showed that two-thirds of the participants scored good or very good on their scores. However, a quarter of the respondents experienced chronic pain, and 27.5 suffered from anxiety. Still, those who experienced PTSD were 10%, and it was more common among females than males. The scores on PTSD could imply that females are likely to experience post-migration stress.

4.3 Post-Migration Stress and Psychological Well-being among Asylum Seekers

Studies on the relationship between post-migration stress and psychological well-being seem limited. Some have, nonetheless, examined the relationship in different ways. A study by Walther et al. (2020) examined the relationship between living conditions, mental health, and the well-being of refugees in Germany. The study was cross-sectional and sampled 4325 adult refugees from a national database. The study found an association between living conditions, psychological distress, and life satisfaction among refugees. This study only looked at living conditions that may be linked to PMS and how they impact well-being, not psychological well-being.

Similar to Walther et al. (2020) is Schilz et al. (2023), who explored the mental health of refugees and its relationship with post-migration living conditions and social support among Arab refugees in Germany. The study was cross-sectional and utilized a random sample of 325 participants. Among other findings, the study showed that the quality of living conditions was linked to negative mental health outcomes. This study only measured the quality of living conditions and social support. There may be a need to look at post-migration stress and psychological well-being. Li et al. (2016) conducted a more direct study to find the relationship between post-migration stress and psychological disorders. The study was a systematic review that sampled articles on psychological disorders and PMS. The findings showed that socio-economic, social, and interpersonal factors, asylum process factors, and immigration policy affect the psychological functioning of refugees. This study only showed the related factors to psychological well-being, measured in terms of psychological disorders.

In a correlational study, Morgan et al. (2017) conducted research to explore the relationship between mental health and post-migratory stress for asylum seekers and refused asylum seekers in Britain. The study selected a random sample of 97 participants who had been screened for anxiety, depression, and PTSD. Analysis of the collected data showed a significant relationship between post-migratory stressors of isolation, restrictive policies, and insecure

immigration status associated with PTSD, with those who were denied asylum scoring higher than their accepted counterparts. The study is closely related to the current study, which aims to test the same in an Irish context.

In mixed-method research, Murphy et al. (2020) explored African asylum seekers' embodied experiences of mental distress in Ireland. The study used semi-structured interviews to collect data from the respondents, which was analysed holistically. The findings indicated that various host nations' practices are cited as being stressful. Rumination, shame, self-hate, anger, mistrust, lack of interest in things, and hopelessness were cited. These findings do not show any relationship but indicate that the asylum seekers' reported experiences show a possible relationship between PMS and psychological well-being.

4.4 Strategies for Overcoming Post-Migration Stress

In a qualitative study, Cenat (2019) assessed how Haiti refugees in Canada among refugees from Haiti coped with the trauma experienced in their journey. It was found that their mental wellness was significantly impacted by exposure to sexual assault, injuries, and imprisonment, not forgetting precarious traumas as manifested through PTSD, anxiety, depression, and general ill health. The findings established resilience on strong pillars of high quality of health, substantial social relationships, and social services provision. This study, however, seems to highlight the interventions provided to refugees in the host country.

Grupp et al. (2022) conducted a qualitative and quantitative study that sampled refugees from sub-Saharan Africa. The study established several coping methods, including religion, social-supportive systems, and cognitive strategies in coping with traumas associated with their circumstance. The adaptive approach was dominant, with educational and symptom load levels predominantly influencing denial, substance use, or seeking emotional support.

In the Netherlands, Dupont et al. (2015) did a qualitative analysis with interviews on asylum seekers yet to attain refugee status on drug and alcohol use and its resultant psychological effects. To counter the trauma involved, understanding the passing time pattern, post-migration, and cultural expectation factors that continue between the country of origin and the host country is more significant than past trauma in accounting for drug and alcohol use patterns in the asylum seeker population. With this, we can posit that drugs and substances were adopted as a coping mechanism for asylum seekers' stress.

Priebe et al. (2016) reviewed the evidence on mental health care for refugees, asylum seekers, and irregular migrants in the WHO European Region. The correlation study recruited 200 participants for the study. It established that there was a need for resources and organizational flexibility to help provide great mental health for asylum seekers. This included fostering societal integration, mounting services for outreach, providing health services, informing them on entitlements and services available, and equipping professionals with requisite skills.

Satinsky et al. (2019) also conducted a systematic review of the literature to establish utilization and access to mental health care among asylum seekers and refugees in Europe. The study reviewed literature from 2007 to 2017 that was qualitative and quantitative. The findings reveal an inadequate utilization of mental health and psychosocial support. The study attributed this inadequate utilization to factors such as language barrier, lack of awareness, negative attitudes by and towards care providers, stigma, and help-seeking behaviors.

5.0 Methodology

5.1 Research Design

The research adopted a quantitative correlational design to establish the relationship between the population of asylum seekers and the depth of psychological well-being characteristics among them. The quantitative correlational design applied both qualitative and quantitative language, models, methods, and techniques extensively in a study to deepen and widen the understanding of the corroboration and research (Creswell & Clark, 2014). Accordingly, this design assisted the researcher in describing how post-migration stress relates to asylum seekers' psychological well-being, which proves its suitability.

5.2 Research Variables

The variables for this research were post-migration stress and psychological well-being. Four factors were used to indicate post-migration stress: financial strain, social strain, competency strain, and perceived discrimination. Psychological well-being was indicated by autonomy, environmental mastery, personal development, purposeful life, positive interpersonal relationships, and self-acceptance. The demographic variables of age, nationality, duration of stay in the foreign country, and education were also used as mediating variables.

5.3 Location of the Study

This study was conducted in Dublin, Ireland. Ireland is one of the major destinations for asylum seekers due to its accommodative policy. Recently, the country has seen an upsurge in asylum seekers into the country. In 2016, the number of asylum seekers in Ireland went down. This was due to the ending of the contract between the country and the International Program for Asylum Seekers (IPAS). However, in 2019, the number rose sharply. By 2023, the number stood at 3,312 in Dublin, totaling 13,300 asylum seekers in the country. This turn of events in the increasing numbers creates a rationale for this study.

5.4 Target Population

The study targeted a population of 13,300 asylum seekers. Asylum Information Database (2023) revealed that there were over 13,000 asylum seekers in Ireland, a population that had drastically increased since 2016. This population was targeted due to the challenges they face despite the assurance in a new country. It has been observed that asylum seekers lose their homes, financial resources, and social circles. Studying how post-migration stress interacts with psychological well-being can be useful in determining better interventions for such a population.

5.5 Sampling Techniques and Sample Size

The study used a probability sampling technique using simple random sampling to select the research participants. According to this method, the researcher randomly selected participants in the study from the population. It is important to note that most direct provision centres in Dublin are inhabited by asylum seekers who significantly outnumber those with refugee status. A primary condition for the participants to be involved in the study was that they must be asylum seekers, which is fundamentally different from refugees.

The researcher selected a sample of 345 participants, calculated using the Cochran formula. This formula is suitable because it helps select samples from populations exceeding ten thousand. The calculation is as follows:

$\frac{Z^2 pq}{e^2}$ Where Z is the standard deviation (1.96) at a 95% confidence interval, and q is 1-p

This will be calculated as follows:

$$\frac{(1.96)^2 \times (0.5)^2}{0.05^2} = 384.16$$

The 384.16 is then rounded up to 385.

The sample will be adjusted using the finite population correction to get a proportionate sample size, as shown below.

$$n = \frac{n_0}{1 + \left(\frac{n_0 - 1}{N}\right)}$$

where n_0 is desired sample which is 385

and N the estimated population size which is 3,312.

Therefore; $n = 385 / [1 + (385-1)/3233] = 345, = 345$

5.6 Data Collection Procedures

Prior to the actual data collection procedure, the researcher obtained the requisite permits and completing the pilot test, the researcher proceeded to introduce themselves to the relevant authorities in Ireland for permission to collect data. This ensured the researcher visited the direct provision centres in Ireland in person. The researcher explained the study's purpose, the harms the participants may experience, and the benefits of participating. The researcher then requested their permission to participate in the study by letting them sign a consent form. Only those who signed the consent form were recruited for the study. They were then issued a questionnaire to complete on their own time and return it within one week. This allowed for a reflective and reasoned response according to their experiences. Once the questionnaires were collected, the researcher secured them for analysis.

5.7 Data analysis

The researcher used descriptive and inferential statistics to analyse quantitative data. The descriptive statistics for the study will be mean, percentages, and standard deviation. These are chosen because they give a simplified representation of the research data. The inferential statistics involved independent sample t-tests and ANOVA. The independent sample t-test was used because it shows mean differences between groups in the scores. At the same time, a ANOVA was found suitable for showing the relationship between variables and for ordinal data collected in the study instrument. Results from the descriptive and inferential statistics were presented using charts and tables.

The qualitative data was analysed using the Terry and Hayfield (2021) five-step thematic analysis technique. According to Terry and Hayfield (2021), the first step of thematic analysis involves reading to familiarise with the interview transcript. The second stage involves reading in detail while identifying and marking every code that corresponds to the specific research objectives or questions. The third stage involves the generation of themes based on the specific codes derived from the transcripts. The fourth stage is the reading to confirm the themes and

determine further whether there are specific themes that may have been left out. The last stage involved the write-up of the themes as they correspond to the research questions.

6.0 Presentation and Discussion of Findings

The descriptive statistics analysis reveals significant insights into the post-migration stress experienced by asylum seekers in Dublin's direct provision centers. Overall, participants reported moderate stress levels, with notable variations across different stressors. While discrimination by Irish individuals was perceived to be relatively low, challenges related to communication, financial instability, and emotional distress, such as homesickness and family separation, were prominent stressors. Additionally, integration difficulties, including feelings of exclusion and loss of societal status, further contributed to participants' stress levels. Interestingly, the presence of data regarding frustration in Sweden raises questions about its relevance within the context of the study. The findings underscore the multifaceted nature of post-migration stress and emphasize the need for comprehensive support mechanisms to address asylum seekers' diverse needs effectively. Additionally, the examination of gender differences in post-migration stress through an independent T-test aimed to determine if such disparities exist, with the null hypothesis suggesting no significant differences as depicted in the table below.

Table 1: Gender Differences in PMS

| | Gender | N | Mean | Std. Deviation | Std. Error Mean |
|-------|--------|-----|--------|----------------|-----------------|
| Score | Male | 173 | 2.8667 | 1.38396 | .30200 |
| | Female | 172 | 2.8429 | 1.37316 | .29965 |

Source: Field Data 2023

Moreover, the results concluded that there are statistical differences in the levels of post-migration stress experienced by male and female asylum seekers residing in direct provision centres in Dublin, Republic of Ireland. Any reported differences in stress scores across genders may result from chance, according to the p-value, which is higher than the significance level rather than actual gender-related differences. This is shown in the table below.

Table 2: Independent Samples Test

| | F | Sig. | T | df | Sig. (2-tailed) | Mean Difference | Std. Error Difference |
|----------------------------------|------|------|------|--------|-----------------|-----------------|-----------------------|
| Equal variances assumed | .005 | .942 | .056 | 40 | .956 | .02381 | .42544 |
| Equal variances are not assumed. | | | .056 | 39.998 | .956 | .02381 | .42544 |

Source: Field Data 2023

The analysis also determined the post-migration stress and psychological well-being and a comprehensive analysis involving correlations, model summary, and ANOVA to explore whether a significant relationship exists between post-migration stress and psychological well-being.

Table 3: Correlation between PWB and PMS

| | | Psychological Well being | Post-migration stress |
|---------------------|---------------------------|--------------------------|-----------------------|
| Pearson Correlation | Psychological Well being | 1.000 | -.014 |
| | Post-migration stress | -.014 | 1.000 |
| Sig. (1-tailed) | Psychological_Well_b eing | . | .401 |
| | Post-migration stress | .401 | . |
| N | Psychological_Well_b eing | 345 | 345 |
| | Post-migration stress | 345 | 345 |

Source: Field Data 2023

The correlation research examined the relationship between a person's post-migration stress levels and psychological well-being. Psychological well-being wellbeing and post-migration stress had correlations of -0.014, meaning that for every unit change post-mitigation stress, psychological well-being was reduced by -0.014. Additionally, the p-values for these associations were 0.401, indicating no statistical significance to these interactions as shown in the table below.

Table 4: R-Square

| Model | R | R Square | Adjusted R Square | Std. Error of the Estimate | Durbin-Watson |
|--|-------------------|----------|-------------------|----------------------------|---------------|
| 1 | .014 ^a | .000 | -.003 | .16888 | 1.565 |
| a. Predictors: (Constant), Post migration stress | | | | | |
| b. Dependent Variable: Psychological Wellbeing | | | | | |

Source: Field Data 2023

The model summary demonstrates how well the data matches the regression model. Indicating how much of the variation in psychological well-being may be attributed to post-migration stress, the R-squared value was near zero (0.000). This implies that post-migration stress contributes little to our knowledge of psychological well-being (Hogan, 2018). The post-migration stress variable was added but did not improve the model's fit, as indicated by the corrected R-squared value of -0.003.

Table 5: ANOVA Results

| Model | | Sum of Squares | df | Mean Square | F | Sig. |
|--|------------|----------------|-----|-------------|------|-------------------|
| 1 | Regression | .002 | 1 | .002 | .063 | .801 ^b |
| | Residual | 9.782 | 343 | .029 | | |
| | Total | 9.784 | 344 | | | |
| a. Dependent Variable: Psychological Wellbeing | | | | | | |
| b. Predictors: (Constant), Post migration stress | | | | | | |

Source: Field Data 2023

The regression analysis is described in the ANOVA table. The regression model's sum of squares has 1 degree of freedom and was 0.002. Additionally, the F-statistic was 0.063, and the mean square was 0.002. The F-statistics-associated significance value was 0.801, more significant than the typical significance level of 0.05. Therefore, when post-migration stress is used as the predictor, the regression model does not statistically significantly contribute to explaining the variation in psychological well-being.

Table 6: Regression Analysis

| Model | | Unstandardized Coefficients | | Standardized Coefficients | t | Sig. |
|-------|-----------------------|-----------------------------|------------|---------------------------|--------|------|
| | | B | Std. Error | Beta | | |
| 1 | (Constant) | 3.170 | .172 | | 18.456 | .000 |
| | Post_migration_stress | -.015 | .060 | -.014 | -.252 | .801 |

Source: Field Data 2023

The constants and coefficients of the predictor variables are discussed in the section on coefficients. The coefficient for the predictor variable (post-migration stress) was -0.015, whereas the constant term was 3.170. The significance level had an alpha = 0.801 > 0.05, indicating that there was no statistically significant impact on explaining psychological well-being in this situation.

The study results indicate that there may not be a causal relationship between post-migration stress and asylum seekers' psychological health. This result is continuously supported by the data analysis, demonstrating that post-migration stress does not significantly affect psychological well-being in this particular situation. This data analysis includes correlations, model summaries, and ANOVA. Overall, the study found no evidence of a link between post-migration stress and individuals' psychological well-being. This suggests that variables other than stress following migration may impact asylum seekers' psychological health more. In this investigation, social support, cultural acculturation, and individual resiliency were not considered but may have implications for mental health.

The study also looked into the relationship between post-migration stress and mental health. The results demonstrate that there is no meaningful link between these variables. This shows that although post-migration stress is a significant problem, it could not significantly influence asylum seekers' general psychological well-being. The research also looked at methods for lowering post-migration stress. It emphasizes the value of holistic strategies that consider various factors, including family welfare, housing conditions, language acquisition, cultural integration, and support services for mental health difficulties. These tactics seek to foster an atmosphere supporting asylum seekers' successful integration and overall well-being.

Furthermore, the study noted a range of strategies for minimizing post-migration stress among asylum seekers residing in direct provision centers in Dublin, Ireland. Firstly, enhancing living conditions and overall experiences by providing legal assistance, improving accommodation, and facilitating job opportunities and language learning are fundamental. Promoting cultural awareness and social inclusion through education about local customs and combating discrimination are also crucial for fostering a sense of belonging and reducing isolation. Additionally, prioritizing mental health support, including access to counseling services and addressing trauma, is vital in alleviating the psychological burden of migration. Policy reforms, such as simplifying work permit procedures and ensuring timely access to healthcare, are essential systemic improvements necessary to enhance the well-being and integration prospects of asylum seekers.

Moreover, creating safe and supportive environments within direct provision centers is imperative to address issues of violence and bullying, while establishing channels for communication between separated family members can mitigate feelings of isolation. Economic empowerment initiatives, including vocational training and financial literacy programs, are essential for promoting self-sufficiency and reducing financial stress. Furthermore, addressing educational discrimination and facilitating access to educational institutions can empower young asylum seekers to pursue academic aspirations, contributing to their overall resilience and integration into society. Therefore, it is true that a comprehensive approach that addresses both individual needs and systemic challenges is essential in effectively supporting asylum seekers and minimizing the adverse effects of post-migration stress.

7. 0 Conclusion

The findings of the study shed light on the multifaceted nature of post-migration stress among asylum seekers in direct provision centers in Dublin, Ireland. Despite relatively low reports of discrimination and language/cultural assimilation issues, asylum seekers grapple with significant emotional challenges, including financial worries, separation-related distress, and feelings of isolation from Irish culture. The moderate overall stress levels, with no statistically significant gender differences, suggest a universal vulnerability to stressors irrespective of gender. However, qualitative insights indicate nuanced experiences, with women facing additional burdens related to family responsibilities, while men are more concerned about employment and financial stability.

Interestingly, while post-migration stress was theorized as a determinant of psychological well-being, the study did not find a significant causal relationship between the two. The study concluded that other factors, not specifically addressed in the study, may play a more significant role in influencing asylum seekers' psychological well-being. Moreover, the proposed strategies

for minimizing post-migration stress encompass a range of interventions, from improving living conditions and facilitating legal processes to providing mental health support and promoting cultural awareness.

The study also concluded that adopting holistic approaches in supporting asylum seekers' well-being is imperative and while addressing post-migration stress is crucial, it is not the sole determinant of psychological health. Thus, efforts to enhance the mental well-being of asylum seekers must consider a broader range of factors, including social integration, economic empowerment, and access to adequate healthcare. Additionally, the findings highlight the need for tailored interventions that recognize the diverse experiences and needs of asylum seekers, particularly regarding gender-specific stressors. There is need for adopting different plans and strategies in promoting the mental health and integration of asylum seekers. It was concluded that by addressing the root causes of stress and implementing targeted interventions, policymakers and practitioners can better support asylum seekers in navigating the challenges of resettlement and fostering a sense of belonging in their new environment.

8.0 Recommendations

In terms of practical recommendations, the study suggested that there is need for offering asylum seekers a comprehensive array of supportive services tailored to their needs. This includes language classes to facilitate communication, financial literacy courses to promote financial independence, and cultural integration programs to aid in adjusting to their new environment. Streamlining legal processes for obtaining legal status is also crucial to provide asylum seekers with certainty and stability while reducing anxiety associated with unclear legal standing. Additionally, providing accessible and culturally sensitive mental health assistance, facilitating family reunification processes, offering job opportunities matching individuals' skills, and encouraging community involvement between asylum seekers and locals are vital measures to alleviate stress and promote well-being.

For further research, the study proposes expanding on the current findings to gain a deeper understanding of the strain experienced by asylum seekers following migration. Longitudinal studies could provide insights into the long-term effects of migration experiences, while comparative studies could explore how contextual factors affect stress levels and coping mechanisms. Additionally, investigating resilience and coping strategies among asylum seekers, considering overlapping identities such as gender, age, and religious convictions, can inform the development of tailored interventions. Understanding how family dynamics and economic integration impact stress levels can further guide policy and intervention plans to support asylum seekers in integrating into society and enhancing overall well-being.

9. 0 References

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