

INTERNATIONAL MIGRANTS' HEALTH

HEALTH STATUS: MENTAL HEALTH

SCIENTIFIC LITERATURE REVIEW SUMMARY SHEET

What will you find on this summary sheet?

This document summarizes the scientific literature regarding mental health of international migrants within the Region of the Americas. The information provided here is based on a broader scoping review of the published scientific literature regarding international migrants' health in the Region of the Americas between January 2016 and March 2023.

This summary sheet is a narrative and descriptive synthesis of main topics related to the field, with a focus on international migration and health in the Region. It does not fully represent the heterogeneity of information available internationally in terms of type of migrants, countries of origin, and study designs; however, it provides a description of general patterns often found in this literature. In this scoping review, 65 articles addressed the mental health of international migrants.

The results presented in the following scientific literature review summary sheet are based on selected articles from the review and are not intended to be an exhaustive review of all current literature. You can find all references in the interactive dashboard located within PAHO's Information Platform on Health and Migration.

[Access the PAHO Information Platform on Health and Migration](#)

Are there other similar scientific literature summary sheets on international migrants' health available?

The scoping review on international migrants' health included a total of 837 academic articles categorized within three broad themes: health outcomes, health systems, and health determinants. All articles are described and presented in an interactive dashboard along with 11 other similar summary sheets that also touch upon specific categories within these three major themes. Additional information on mental health can be found in summary sheets on Health Systems and Health Determinants.

MAIN FINDINGS

What can we learn about International Migrants' Mental Health from the scientific literature so far?

Studies retrieved from the published scientific literature suggest some of the following findings:

DEPRESSION AND ANXIETY

- A study found that mild and moderate depressive symptoms are prevalent in Latino migrants. Migrant women show higher scores at depressive screening tests compared to men (1).
- In the case of men, research indicates that depression symptoms in Latino men who recently migrated were associated with conformity to masculine role norms (2).
- Studies carried out in South America have shown that Venezuelan migrants who experienced discrimination were 3.5 times more likely to develop anxiety disorders, compared to non-discriminated migrants (3). Similarly, Peruvian, and Colombian migrants living in Chile suffered the effects of discrimination on anxiety and depression (4).
- A study shows that assimilation or integration strategies caused high burden of depression in Peruvians (4).
- During a study, comparisons between migrants and their non-migrant counterparts in their country of origin revealed greater risk of major depression in Sardinians who migrated to Argentina, particularly young women (5).
- Loneliness and isolation also might be exacerbated in older migrants due to barriers for social participation like lack of language proficiency and unfair treatment from the host



society, according to a study. These loneliness and isolated states have been described in migrants from China, Hong Kong, Macau, and Vietnam living in Canada in whom depression and anxiety was also detected (6).



- Migrants with non-communicable diseases showed high rates of depression in a study, as is the case of Korean migrants with type II diabetes whose incidence was higher than the local U.S population (7).
- Undocumented African women who face multiple stressors due to the administrative barriers regarding their legal status, were reported to have experienced feelings of sadness, depression, anxiety, and fear, which were explained by socioeconomic difficulties, mobility restrictions and constant uncertainty (8).
- A systematic review from the USA found that migrants present higher risks of loneliness and social isolation and may experience language barriers that poses them at higher risk for suicide (9). Another study reinforced the concept of social disconnection as an important determinant of mental health and suicide risk among immigrant populations in core anglo-sphere countries (10).
- Young migrants experience higher rates of self-harm and suicide attempt (11).
- Immigrants are more reluctant to seek help from professional mental health services due to

barriers such as stigma, cultural beliefs, lack of English language proficiency, and lack of trust in health care providers (12).

POST-TRAUMATIC DISORDER

- A study found that the immigration process was perceived as traumatic by 21.4% of migrants due to the fear of death or injury for themselves or their loved ones. Standard trauma assessment failed to detect these traumatic events, which was only identified through a specific migration module (13).
- A systematic review of the literature found that the prevalence of post-traumatic stress disorder was 31.46% within refugees and asylum seekers, who are exposed to challenging conditions that may represent traumatic events such as violence, family separation, and administrative barriers amongst others (14).

SUBSTANCE USE

- Evidence from a study of forced migrants in the United States revealed alcohol use and dependence. Among Iraqi and Cambodian refugees, prevalence rate of alcohol use ranged from 13% to 38%, respectively. Further, within one year of follow up, more recent Iraqi refugees increased consumption by 20%. Also, almost half

of Somali refugees in the United States showed some sort of drug use. However, when substance use disorders were analyzed in all refugees, prevalence was low (e.g., 4% for Cannabis and less than 1% for cocaine, hallucinogens, amphetamines, and opioids/heroin). Refugees reported lower likelihood of having substance use disorders as compared to non-refugee population (15).

STRESS

- Stress induced from the adaptation to a new culture could be exacerbated by discrimination and exclusion. This phenomenon has been described in studies of South American intra-regional migration (4) and could lead to poor health outcomes mediated by a network of social resources (16).
- Venezuelan migrants living in the U.S also reported high levels of stress, attributed to the challenging context of migration (17).
- Migratory stress has been also described among refugees and asylum seekers. Those living in Chile have expressed diverse feelings related to discrimination and homesickness, which is added to the stress faced during other phases of migration (18).
- Peruvian and Colombian migrants have experienced stress due to family separation, especially Colombians who migrate alone (16).
- A study in United States immigration detention facilities revealed associations between early-life adversity and migration-related stress on the mental health of Central American and Mexican migrating children. In this sample, a total of 97.4% of children experienced at least one premigration traumatic event. PTSD symptom severity was most strongly predicted by premigration trauma and duration of parent-child separation (19).

INTERVENTIONS FROM HOST COUNTRIES

Generally, immigrants with a weak sense of community belonging were more likely to rate their



general and mental health as poor although the association is stronger in mental health (20).

Some studies report host countries' initiatives to attend to mental health conditions of the migrant population, which points to some of the following insights:

- Lifestyle interventions have shown positive effects on depressive symptoms of Latino migrants living in poverty (1).
- An intervention of self-care management had a positive influence on problem solving and habits in this migrant collective (21).
- Asian migrants have been benefited by peer-support intervention which led to substantial changes in loneliness, resilience, and social participation (6).
- Self-help interventions reduced depression severity of Korean migrants (7).
- Interventions aimed specifically at addressing alcohol and drug misuse have shown effectiveness on some mental health symptoms. A cognitive behavioral tailored intervention for Latino migrants lowered depression, anxiety, post-traumatic disorder symptoms, but failed to reduce substance misuse at six-month follow-ups (22).

Featured Article

Beyond Trauma: Post-resettlement Factors and Mental Health Outcomes Among Latinos and Asian Refugees in the United States (23)

Refugees and displaced persons that have experienced war and/or political violence have been found to be at greater risk of presenting mental health problems. This study explores post-resettlement factors and their association with mental health, with the purpose of addressing mental health concerns of refugees. To address this research objective, the study used secondary data from a nationally representative survey, with a sample of 656 Latino and Asian refugees in the United States.

Results indicate that while post-resettlement traumas were associated with mental health outcomes, pre-resettlement traumas were not. Risk factors identified to negatively impact mental health outcomes in this population included unemployment, everyday discrimination, and limited English. These results suggest that pre-resettlement traumas may not be the best indicator of mental health outcomes. However, such results should not be understood as a motive to undermine pre-resettlement traumas, but to highlight the importance of ongoing exposures that impact refugees' mental health.



Featured Article

Health and Mental Health Effects of Local Immigration Enforcement (24)

This study explores the effect of local immigration enforcement policies on mental health of Latino immigrants living in the United States, using secondary data from the National Health Interview Survey for 2000–2012.

Results show that these immigration enforcement policies enhanced mental health conditions, increasing the share of Latino immigrants with mental health distress while reducing the proportion of immigrants that report very good or excellent health.

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HEALTH AND MIGRATION

MAPPING OF SCIENTIFIC
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