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## Review article

# Migration and its impact on mental and physical health: Social support and its main functions



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## ARTICLE INFO

## Article history:

Received 20 February 2014

Received in revised form

16 May 2014

Accepted 19 May 2014

Available online 2 June 2014

## Keywords:

Social support

Social network

Immigrant

Health

Mental health

## ABSTRACT

Social support was one of the first factors identified as factors moderating the influence of adverse life events on psychic well-being and health of human. Social support is also an important factor in the process of the immigrants' integration (as a part of adaptation process) and at the same times also a significant determinant of their health. Immigrants constitute a vulnerable social group with specific health needs and their health condition is influenced by a lot of factors. The article submits a survey of studies dealing with social support and its relation to the immigrants' mental and physic health and also to integration. The goal of this study is to describe functions of social support of immigrants, to monitor the connections between migration (and integration) and access to social support and the relation of social support to the immigrants' mental and physical health.

*Methodology of research activity:* The source of information consisted of publications in databased journals (Scopus, Ebsco and Medline databases) and monographs related to the topic.

*Conclusion:* Social support has three main functions: (1) promotion of physical health, (2) promotion of mental health and (3) development of integration – as a growing into democratic society. The information obtained can help us to find ways to strengthen specific immigrant supporting system.

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## Introduction

At present, migration and the related integration of migrants into the majority society constitute one of the most burning

and sensitive global challenges of humanity. Thus the immigrants' health condition becomes one of the relevant subjects that should become part of strategic considerations when creating the health care concept and be included in the integration policy of the state. Successful policy of integration

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<http://dx.doi.org/10.1016/j.kontakt.2014.05.007>

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of foreigners constitutes the key element of policy of legal migration. Migration policy can contribute at the same time to the success of integration policy – it can be trouble-free and bilaterally beneficial only if it is directly followed by integration measures helping the foreigners to integrate into the society. The central document of integration policy of the Czech Republic is the Concept of Integration of Foreigners on the Territory of the Czech Republic (hereinafter referred to only as “the Concept”), updated every year. The priorities of the updated Concept consist in the measures aimed at four key areas of integration of foreigners – knowledge of Czech, economic and social self-sufficiency, good understanding of the society and relations among communities. But unfortunately, the proposals of the individual measures of the Concept do not reflect the immigrants' health and social support that has strong impact on the health in its consequence. The immigrants' health condition and health support is underestimated by the politicians, care providers and by the very immigrants.

Immigrants constitute a vulnerable social group with specific health needs. As Brabcová [1] states, their health condition is influenced by a lot of factors like language and cultural barrier, psychosocial impacts of migration, potential social discrimination, reduced financial accessibility of health care, different character of sickness rate caused by medical conditions in the country of origin and culturally specific presentation of displays of the sickness.

Studies show that the immigrants' health condition is just as good or better as compared to native population, but that advantage decreases with the duration of stay in the host country [2]. The effect of healthy immigrant is explained by the fact that the arriving foreigners constitute only a selected part of the inhabitants of their country of origin, consisting mostly of people in working age, more healthy, fitter and not suffering from chronic illnesses [3]. The decreasing level of the immigrants' health condition is usually explained by increasing occurrence of unhealthy behaviour and psychosocial burden related to migration and integration. In connection with increasing acculturation, immigrants display more frequent tendencies to smoking and drinking of alcohol [4]; incidence of higher body mass index was recorded as well [2].

The basic premise relating migration and health of immigrants in the literature is based on the finding that migration has negative impact on health, particularly on mental well-being [5]. Other researchers found that the integration process induces tension, resulting also to worsened mental health [6]. Traumatic experience related to migration, separation from the family or community and language barrier were identified as factors related to increased risk of mental disorders [7]. Those factors include also unemployment and experience with discrimination [8]. Physical health constitutes another factor influencing the relation among migration, social support and mental health. Several studies recognized close relation between mental and physical health [9]. Bad health condition can lead to reduced accessibility of support, which turned up to be significant in prevention of depressive symptoms [10]. Methodology of research activity: the source of information consisted of publications in databased journals. The Scopus, Ebsco and Medline databases were chosen, as their focus is adequate for

acquisition of publications from health and social area. Articles containing the following terms were used: immigrant – social support, immigrant – mental health, immigrant – health, immigrant – social networks, social support – mental health. Articles from the years 1991 through 2010 were incorporated. In connection with geographical anchorage, it must be stated that articles describing predominantly the Euro-American situation were used, particularly due to lack of relevant publications from the Czech Republic.

For the needs of the article, immigrant is understood as a foreigner settled in the long term, living legally on the territory of the state for one year at the minimum. That means that it is a foreigner staying on the territory of the state based on long-term visa or long-term residence permit, or possibly permanent residence permit. Such method of determination of the term “immigrant” excludes the foreigners arriving with tourist visa.

### *Social support from the theoretical perspective*

Caplan [11] describes social support as a system of formal and informal relations through which the human gets sources to master stress situations. An important feature of social support consists in providing us with a specific form of assistance [12]. The functional contents of social relations in the area of social support are conceived as four types of assistance: emotional, instrumental, informational and evaluating [13].

While emotional support is provided particularly within primary groups with creation of so called strong bonds among their members, weak social bonds seem to be more important in providing advice and information [14]. Weak bonds include less intimate and particularly formal relations resulting from membership in different associations, organizations or from working environment; they are understood rather as a feature of social integration. An interesting finding states that weak bonds do not act as protective factor in stressing situations, but even though they are closely related to health [15].

The structure and variety of social bonds, the frequency of contacts and cohesion of social networks may influence significantly the actually received social support that in turn strengthens the subjective feeling of availability of support influencing health [15]. Due to the finding that strong bonds have higher protective effect, most contemporary studies focus particularly on emotional support [16]. Perceived emotional support (i.e. the humans' feeling that their related persons like them that they will care for them, that they are ready to help them) is, according to the present findings, related to mental and physical health more than the actually received support [15]. Coffman's and Ray's study points out the fact that physical presence of the supporting person is not important; it suffices to know that such person is available when needed [17], or that such person prays for us [18]. Emotional support includes also sharing of ideas and experience [19] and the opportunity to express safely one's concern, as well as calming of the situation thanks to diversion of attention from one's problems [20]. An alternative way of providing social support includes also the Internet [19] or phone. Pets [21] were included in social supporting networks too.

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