



Correlates of depressive symptoms among North Korean refugees adapting to South Korean society: The moderating role of perceived discrimination



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ABSTRACT

Although the prevalence of depressive disorders among North Korean (NK) refugees living in South Korea has been reported to be twice the rate of their South Korean counterparts, little is known about the correlates of depressive symptoms among this population. Despite their escape from a politically and economically repressive setting, NK refugees continue to face multidimensional hardships during their adaptation process in South Korea, which can adversely affect their mental health. However, to our knowledge, no empirical research exists to date on depressive symptoms in the context of adaptation or perceived discrimination among NK refugees. To fill this gap, this study used a sample of 261 NK refugees in South Korea from the 2010 National Survey on Family Violence to examine associations between sociocultural adaptation, perceived discrimination, and depressive symptoms, as well as the moderation effect of discrimination on adaptation to depressive symptoms. We found that poor sociocultural adaptation and perception of discrimination were associated with increased levels of depressive symptoms. Perception of discrimination attenuated the association between better adaptation and fewer depressive symptoms, when compared to no perception of discrimination. These findings highlight the need to improve NK refugees' adaptation and integration as well as their psychological well-being in a culturally sensitive and comprehensive manner. They also underscore the importance of educating South Koreans to become accepting hosts who value diversity, yet in a homogeneous society.

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1. Introduction

Refugee admission, protection, and resettlement have been a moral obligation in many countries (Beiser and Hou, 2001). Helping refugees successfully resettle can be an early investment making them become contributing members of their host countries in the long term (Beiser, 2009; Beiser and Hou, 2001). However, refugees are at risk of poor mental health, which can be a significant loss in human capital and economic productivity (Beiser, 2009). As a consequence of forced migration and traumatic events experienced before resettlement (Fazel et al., 2005), refugees exhibit higher rates of mental illness than those exhibited by the general

population (Porter and Haslam, 2005). In addition, a number of studies have shown that enduring stressful experiences, such as adjusting to life in a different culture, loss of social support, unemployment, living in poverty, discrimination, and marginalization, after resettlement adversely affect the mental health of refugees (Beiser and Hou, 2006; Kirmayer et al., 2011; Marshall et al., 2005; Noh et al., 1999; Porter and Haslam, 2005; Watters, 2001). These post-migration factors can be addressed through interventions upon resettlement (Murray et al., 2010).

Despite their escape from a politically and economically repressive setting, North Korean (NK) refugees living in South Korea are not exempt from additional challenges after their resettlement. Empirical studies and reviews have documented that NK refugees experience poor mental health (Chung and Seo, 2007; B. Jeon et al., 2009; W. Jeon et al., 2005; H. H. Kim et al., 2011; Min, 2008), unemployment (Bidet, 2009; J. U. Kim and Jang, 2007; Lankov, 2006), discrimination (J. U. Kim and Jang, 2007; S. Y. Kim, 2010) and social

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exclusion (S. Y. Kim, 2010; Park et al., 2009; Suh, 2002) in South Korea, in addition to trauma experienced before entering the new society. In the case of depressive disorders, the prevalence among NK refugees has been reported to be twice the rate of their South Korean counterparts (H. H. Kim et al., 2011). However, to our knowledge, no empirical research exists to date on depressive symptoms in the context of adaptation or perceived discrimination among this population. Thus, in response to this research gap, this study aimed to explore whether sociocultural adaptation and perceived discrimination are associated with depressive symptoms among NK refugees who live in South Korea and whether the association between sociocultural adaptation and depressive symptoms among NK refugees is moderated by perceived discrimination. To provide some context to this exploration, we provide some background to the NK refugee experience below.

1.1. Background

In the mid-1990s, a severe food crisis precipitated by natural disasters spurred a large-scale exodus of North Koreans searching for food and freedom in neighboring China despite the dangerous journey (E. Kim et al., 2009; S. Y. Kim, 2010; Ko et al., 2004; Lankov, 2006; Min, 2008). Although the United Nations High Commissioner for Refugees (UNHCR) generally considers North Koreans in China as 'persons of concern' who are pending refugee status determination procedures (UNHCR, 2004), China views them as illegal migrants in search of economic resources (D. S. Kim, Cho and Moon, 2007; Ko et al., 2004). China has maintained a historically close relationship with North Korea and signed the Agreement on Repatriation of Border Crossers with North Korea in 1987 (D. S. Kim et al., 2007). When repatriated, NK refugees are interrogated, tortured, imprisoned in concentration camps, or executed in public because leaving North Korea without governmental permission is considered a political crime (H. Lee and Gerber, 2009). In addition, if a NK refugee's escape is discovered by North Korean officials, family members of the refugee who remained in North Korea are also in great danger (W. Jeon et al., 2005; Ko et al., 2004). This makes them vulnerable to various human rights violations (E. Kim et al., 2009; Ko et al., 2004). E. Kim et al. (2009) reported that approximately 80%–90% of NK refugee women are victims of trafficking and sexual exploitation in China. The number of those residing in China and other countries has been estimated to be between 30,000 and 300,000 (E. Kim et al., 2009; Ko et al., 2004; Lankov, 2006; Park et al., 2009), whereas the number of NK refugees who have successfully entered South Korea exceeded 27,000 as of October 2014 (Ministry of Unification, 2014).

Upon successful arrival in South Korea, NK refugees are granted citizenship in addition to various types of settlement support from the government (J. U. Kim and Jang, 2007; Min, 2008), usually in the form of generous monetary compensation (Chung and Seo, 2007; Lankov, 2006; Suh, 2002). However, such support and resources do not include sufficient emphasis on mental health treatment (Chung and Seo, 2007), nor are they comprehensive enough to promote NK refugees' overall well-being (S. Y. Kim, 2010; Park et al., 2009; Suh, 2002). Specifically, research has indicated high prevalence rates (30%–50%) of depressive disorders among NK refugees (Eom and Lee, 2004; B. Jeon et al., 2009) as well as a significant increase in depressive symptoms associated with years lived in South Korea (Y. Cho et al., 2005). Some scholars have attributed depression among NK refugees to loneliness from being socially excluded, profound guilt about leaving their families behind in North Korea, and pressure to survive in a competitive capitalistic society (B. Jeon et al., 2009; Min, 2008).

South Korea is an ethnically homogenous nation that has a short history of immigration and aversion to multiculturalism (Bidet,

2009; W. Jeon, 2000). Hence, despite the fact that North and South Koreans share the same original ethnicity and racial identity (Park et al., 2009), reports have revealed that South Korean civilians are generally discriminatory toward or show contempt for NK refugees (J. U. Kim and Jang, 2007; S. Y. Kim, 2010). J. U. Kim and Jang (2007) stated that almost half of South Korean respondents in a national poll expressed apathetic attitudes toward NK refugees. Despite the South Korean government's emphasis on support of vocational training and assistance for NK refugees, the majority of refugees who gain employment quit their jobs within a year (B. Jeon et al., 2009) and experience prejudice and discrimination by South Koreans in the workplace (J. U. Kim and Jang, 2007; S. Y. Kim, 2010; Lankov, 2006; Min, 2008). As a consequence, NK refugees tend to conceal their country of origin due to fear of experiencing discrimination by their South Korean counterparts (Min, 2008). Moreover, the majority of NK refugees face language barriers that cause difficulties in their daily life (J. U. Kim and Jang, 2007; Min, 2008); some have expressed that they are unable to comprehend the South Korean language (Lankov, 2006). Although both countries use the same language, more than 60 years of separation has created a wide linguistic gap (D. S. Kim et al., 2007; Park et al., 2009) in dialects, word meanings, and expressions (Lankov, 2006). NK refugees are easily identified by South Koreans by their dialect during verbal exchanges. Furthermore, NK refugees have reported experiencing significant difficulty managing their finances in the capitalistic South Korean society (Chung and Seo, 2007), particularly because they are not sufficiently trained about the concept of money or how to manage it appropriately. Some NK refugees express ambivalence toward money due to its portrayal in North Korea as a symbol of selfishness and evil in capitalism (W. Jeon, 2000). Thus, the struggles that NK refugees face after resettling in their new environment are multifaceted and require comprehensive examination to inform efforts to improve their psychosocial well-being.

2. Sociocultural adaptation, perceived discrimination, and depressive symptoms

The sample of this study consisted of ever-married refugee adults who came from North Korea, a nation with fairly different ideologies and values than their host country. Level of adaptation to a new social and cultural environment has been found to be a determinant of mental illness, particularly depression and post-traumatic stress disorder, among refugee populations (Beiser, 2009; Beiser and Hou, 2006; Kirmayer et al., 2011). Significant distress can be experienced during the cultural change process through confusion of ethnic and religious identities, changes in gender roles, and intergenerational conflicts within the family, which can directly or indirectly affect the mental health of refugees (Kirmayer et al., 2011). NK refugees' process of adaptation to South Korea involves several other domains beyond language proficiency, such as understanding capitalism, liberal democracy, law, and attitudes and behaviors of South Koreans (Suh, 2002), due to the wide sociocultural gap between the two Korean nations. Thus, this study hypothesized that a high level of sociocultural adaptation to the host country would serve as a protective factor of psychological distress, hence will be negatively associated with depressive symptoms among NK refugees.

Unfair treatment such as perceived discrimination is strongly associated with depression in the general population; such associations are more significant among socially disadvantaged individuals in the United States (Kessler et al., 1999). The perception of unfair treatment can harm an individual's self-esteem and self-efficacy or hinder opportunities to be active in social and economic spheres, which may increase the risk of mental health

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