Pre-Settlement and Post-Settlement Stressors and Mental Illness Among Migrants from War-Torn Countries in the Middle East: A Scoping Review

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ABSTRACT

The rising influx of Middle Eastern immigrants from war-torn countries into Canada, the United States, Europe, and Australia underscores the urgent need to understand the stressors they face during pre-settlement and post-settlement phases and their consequent impact on mental health. This scoping review addresses this gap by exploring 16 existing studies on Middle Eastern immigrants' experiences in these regions published since 1995. The studies were identified through database searches and selected based on specific inclusion and exclusion criteria focused on Middle Eastern immigrants from war-torn countries resettling in North America, Australia, and Europe. The review reveals that immigrants and refugees encounter significant challenges during resettlement, including acculturative stress, loss of status, and existential struggles. These stressors contribute to higher prevalence rates of psychological disorders compared to the general population. Examining the 16 studies predominantly from North America, Australia, and Europe, our review underscores the complex interplay between pre-settlement and post-settlement stressors and mental health outcomes among Middle Eastern immigrants. However, the limited scope of current research highlights the pressing need for further investigation across different continents and regions.

1. Introduction

In an era marked by unprecedented global turmoil, the world bears witness to a mass exodus of Middle Eastern immigrants fleeing the ravages of war and civil unrest. This relentless tide of human displacement has inundated nations across 3 continents, from the shores of North America to the vast expanse of Australia, leaving an indelible mark on the global landscape. As these weary travelers seek refuge in foreign lands, they carry with them the scars of unspeakable trauma, a testament to the harrowing consequences of conflict that have torn asunder their homelands. Many suffer from psychological disorders such as anxiety, depression, and PTSD, stemming from exposure to pre-migration traumatic events like war, violence, and loss of material welfare and status (Li et al., 2016; Silove et al., 1997).

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According to the United Nations High Commissioner for Refugees (UNHCR), the staggering number of refugees, asylum seekers, and internally displaced persons worldwide exceeded a staggering 60 million individuals in 2015, a sobering statistic that underscores the urgency of this humanitarian crisis (UNHCR, 2015). The mental health toll of war and forced displacement cannot be overstated, as studies have documented elevated rates of psychological distress, psychiatric disorders, and suicidal ideation among Middle Eastern immigrants, particularly women (Jamil et al., 2002; Jamil et al., 2010; Norris et al., 2011). Untreated mental health issues can have severe and long-lasting consequences, hindering immigrants' ability to integrate into host societies, maintain employment, and lead fulfilling lives.

Yet, amid this mass upheaval, a deafening silence pervades the scholarly discourse, leaving a critical gap in our understanding of the unique stressors experienced by Middle Eastern immigrants during their arduous journey from war-torn regions to newfound havens. The challenges they face during the resettlement process, including acculturative stress, language barriers, discrimination, and limited access to mental health services, can exacerbate existing psychological distress and impede their well-being and integration (Lindencrona et al., 2008; Porter & Haslam, 2005).

It is within this void that the present scoping review emerges as a beacon of ground-breaking inquiry, a pioneering effort to shed light on the profound impact of pre-settlement and post-settlement stressors on the mental well-being of this vulnerable population. Transcending geographical boundaries, this study synthesizes existing literature from diverse regions, weaving together a tapestry of narratives that elucidate the complex interplay between stressors and mental health outcomes. Through a rigorous examination of relevant studies, this seminal work endeavors to inform future research, policy, and practice initiatives, paving the way for a comprehensive and compassionate response to the plight of Middle Eastern immigrants.

In an era defined by global connectivity and unprecedented human mobility, the resettlement of Middle Eastern immigrants from war-torn nations stands as a defining challenge of our time. This scoping review represents a clarion call to action, a rallying cry for scholars, policymakers, and practitioners alike to unite in addressing the mental health needs of those who have endured the unimaginable. By illuminating the intricacies of their experiences, we forge a path towards fostering resilience, promoting healing, and cultivating a world where the trauma of displacement is met with unwavering empathy and resolute support.

2. Brief Review of the Literature

2.1. Pre-Migration Trauma and Its Impact

The literature highlights the profound impact of pre-settlement stressors and exposure to trauma on the mental health of Middle Eastern immigrants from war-torn countries. Multiple studies found a significant association between exposure to pre-migration trauma, such as war, violence, and conflict, with elevated rates of psychological disorders like anxiety, depression, and PTSD among immigrants and refugees (Li et al., 2016; Silove et al., 1997; Norris et al., 2011). Specific experiences such as witnessing killings, being assaulted, or suffering torture and captivity were reported by a significant proportion of asylum seekers in Australia, with over a third meeting the criteria for PTSD (Silove et al., 1996; Nickerson et al., 2009).

2.2. Post-migration Stressors and Challenges

In addition to pre-migration trauma, Middle Eastern immigrants face numerous post-settlement obstacles that can exacerbate existing mental health issues and hinder integration and well-

being. These include unemployment, poverty, language barriers, discrimination, and challenges establishing a sense of belonging (Li et al., 2016; Silove et al., 1997; Norris et al., 2011). Systemic barriers, such as limited access to resources and social support networks, further compound the difficulties faced by these immigrant communities (Lindencrona et al., 2008; Valtonen, 1998).

2.3. Gender and Mental Health Outcomes

The literature suggests that gender may play a role in the mental health outcomes of Middle Eastern immigrants, with women potentially facing additional stressors or vulnerabilities during the resettlement process. Studies in the United States found that the overall health of immigrant women declined, and suicide rates increased among Arab groups of women (Jamil et al., 2002; Jamil et al., 2010; Norris et al., 2011).

2.4. Access to Mental Health Services

Lack of access to mental health services and support networks during the resettlement process can exacerbate existing psychological distress among Middle Eastern immigrants (Porter & Haslam, 2005). Researchers found a direct association between the number of services received in the first year of arrival and the decline in mental health status, suggesting that the mental health concerns of recent migrant groups are often neglected (Maximova & Krahn, 2010).

2.5. The Resettlement Experience and Integration

The challenges faced by Middle Eastern immigrants during the resettlement process are further exacerbated by obstacles to integration, such as disempowerment, stressor consistency, and lack of robust roles (Valtonen, 1998). Studies in Sweden and Finland highlighted the enduring impact of pre-migration trauma and the complexities of the resettlement process for these communities (Lindencrona et al., 2008; Valtonen, 1998), underscoring the importance of tailored interventions and policies to support their mental health and integration needs.

2.6. Previous Reviews

In a landscape where scholarly investigations into the mental health of Middle Eastern immigrants are scarce, this scoping review emerges as a beacon of ground-breaking research, distinct in its focus on the often-overlooked cohort of individuals from war-torn countries. While prior studies have touched upon the challenges faced by Middle Eastern immigrants, they have largely sidestepped the specific context of ongoing conflict and displacement. Notably, a solitary scoping review by Baobaid et al. (2018) delved into pre-migration and post-migration stressors among Middle Eastern immigrants. However, this study, centered on marital relations, failed to capture the nuanced experiences of individuals from war-torn regions, relegating their narratives to the periphery.

This study, in stark contrast, boldly confronts this gap in the literature, shedding light on the unique challenges encountered by Middle Eastern immigrants fleeing conflict-ridden homelands. Whereas Baobaid et al. (2018) examined a cohort primarily from Syria and Iraq residing in Canada, this research transcends geographical boundaries to encompass a broader spectrum of resettlement experiences across North America, Europe, and Australia. By casting a wider net, we capture a more comprehensive understanding of the multifaceted stressors and their ramifications on mental health.

Moreover, while previous studies have underscored the impact of pre-migration trauma and post-migration settlement on family dynamics, this study extends beyond familial relationships to explore the broader socio-cultural milieu. Baobaid et al. (2018) illuminated the complexities of Arab family structures and the influence of cultural and religious values on the refugee experience. However, this research goes beyond mere examination to propose tangible solutions, advocating for culturally sensitive therapeutic interventions tailored to the unique needs of Middle Eastern immigrants.

In a domain characterized by adversity and resilience, this study heralds a paradigm shift in understanding the mental health trajectories of Middle Eastern immigrants. By unraveling the intricate interplay of trauma, displacement, and adaptation, we pave the way for targeted interventions aimed at mitigating the adverse effects of war-related migration. Our findings not only enrich the scholarly discourse but also empower service providers to better support and advocate for this marginalized population. Thus, this research stands as a testament to the transformative potential of rigorous inquiry in fostering inclusivity and well-being in immigrant communities.

3. Methods

This scoping review meticulously follows the methodological framework pioneered by Arksey and O'Malley (2005), which has since been refined by Levac et al. (2010) and Tricco et al. (2016). This methodological approach offers a robust and structured framework for systematically mapping the intricate dynamics surrounding pre-settlement and post-settlement stressors and their consequential effects on the mental health of Middle Eastern immigrants across diverse geographical contexts, including North America, Australia, and Europe.

3.1. Eligibility Criteria

The initial research question guiding this review is:

- RQ1. What is the impact of pre-settlement and post-settlement stressors on the mental health of Middle Eastern immigrants settling in North America?

In scoping reviews, as authors delve into the extensive literature available on a topic, it is common to refine the scope based on the insights gained from existing studies and the contributions of renowned scholars in the field (Arksey & O'Malley, 2005). This necessity drove the decision to undertake the present scoping review, as no prior work comprehensively addressed the specific focus outlined in this study. Upon embarking on the research, it became apparent that much of the available literature pertaining to Middle Eastern immigrant populations predominantly focused on children rather than adults. Given the robust child welfare systems in regions like North America, Australia, and Europe, significant attention had been devoted to studying and supporting children of Middle Eastern immigrants. Consequently, literature concerning children and youth was deemed beyond the scope of this review.

Furthermore, the review implemented strict inclusion and exclusion criteria to ensure the relevance and timeliness of the selected studies. All studies predating the year 1995 were excluded to capture the experiences of individuals exposed to recent conflicts within the past 25 years, such as the Gulf War, the Iraq War, and various civil conflicts across the Middle East, including Lebanon, Syria, Iraq, and Yemen. Additionally, countries in the Middle East that had not experienced significant conflict since 1995 were excluded from consideration. This deliberate focus on recent conflicts aimed to provide insights into the mental health implications of war-related migration experiences among Middle Eastern immigrants. Lastly,

studies encompassing predominantly Arab-North African immigrant populations were excluded, as their socio-economic and geopolitical contexts differ significantly from those of Middle Eastern countries affected by conflict, thus ensuring the coherence and relevance of the study's findings.

3.2. Search Strategy and Study Selection Process

The search for relevant literature encompassed both published research and unpublished sources across a range of databases, concluding on May 1, 2024. These databases included Social Services Abstracts, Social Work Abstracts, Google Scholar, ProQuest, JSTOR, PsycINFO, PubMed, PsycARTICLES, and Sociological Abstracts. Despite the meticulous search strategy, the initial results yielded a limited pool of six studies that aligned closely with the specified keywords and the predetermined inclusion and exclusion criteria. Recognizing the need for a more expansive dataset to effectively address the research questions, the researcher recalibrated the scope of the review. This adjustment aimed to broaden the selection criteria while maintaining the focus on relevant themes and methodologies pertinent to the study objectives. By widening the scope, the researcher sought to incorporate additional studies that shared commonalities in keywords and criteria, thereby enhancing the comprehensiveness and depth of the review.

As the scoping review evolved, the inquiry crystallized into a refined focus encapsulated by the following question:

- RQ2. What is the impact of pre-settlement and post-settlement stressors on the mental health of Middle Eastern immigrants settling in North America, Australia, and Europe?

Broadening the geographical scope to encompass Australia and Europe yielded a corpus of ten additional studies, augmenting the original dataset to a total of 16 studies. This expansion facilitated a multifaceted exploration of the ramifications of pre-settlement and post-settlement stressors on the mental well-being of Middle Eastern immigrants across three continents. Despite the initial bounty of 47 eligible studies identified through rigorous scrutiny, only 16 studies aligned closely with the stringent criteria set forth by the review as highlighted in the PRISMA flow diagram (Figure 1). The meticulous curation process, characterized by the judicious deletion of duplicate and ineligible studies, ensured the inclusion of only those studies that met the exacting standards delineated by the study's parameters. This judicious selection process, guided by specific keywords and inclusion criteria, culminated in a meticulously curated dataset that encapsulated the nuances of the targeted research domain.
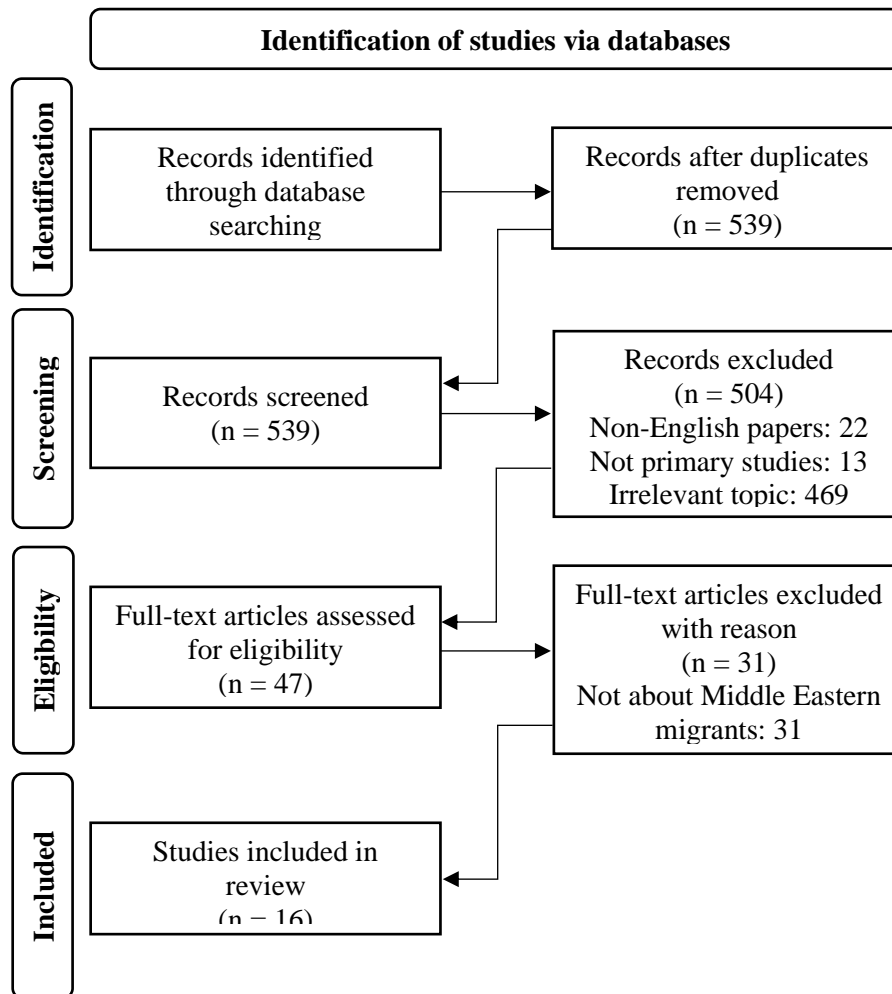
Identification of studies via databases

Identification

Records identified through database searching

Records after duplicates removed
(n = 539)

Screening

Records screened
(n = 539)

Records excluded
(n = 504)
Non-English papers: 22
Not primary studies: 13
Irrelevant topic: 469

Eligibility

Full-text articles assessed for eligibility
(n = 47)

Full-text articles excluded with reason
(n = 31)
Not about Middle Eastern migrants: 31

Included

Studies included in review
(n = 16)

Figure 1. PRISMA flowchart of study selection process

The data extraction process for this scoping review followed a systematic and rigorous approach to ensure the comprehensive synthesis of relevant information from the included studies. A standardized data extraction form was developed to capture critical details from each study, including citation information, study characteristics (sampling frame, response rate, country of study), and key findings pertaining to the impact of pre-settlement and post-settlement stressors on mental health outcomes among Middle Eastern immigrants. This structured approach facilitated the organized collation and synthesis of data across the diverse range of studies.

While scoping reviews do not typically involve a formal quality assessment as in systematic reviews, the author recognized the importance of critically appraising the methodological rigor and potential biases of the included studies. One approach employed in this scoping review was the assessment of study designs and methodological strengths and limitations. Studies with robust sampling techniques, appropriate statistical analyses, and clear reporting of results were given greater weight in the synthesis process. Additionally, the author examined potential sources of bias, such as selection bias, measurement bias, and publication bias, and considered these factors when interpreting and synthesizing the findings.

4. Findings

The findings of this scoping review shed light on the multifaceted nature of pre-settlement and post-settlement stressors experienced by Middle Eastern immigrants from war-torn countries,

underscoring their profound impact on mental health outcomes. Across diverse geographic regions, researchers have documented elevated rates of psychological distress among immigrant populations, highlighting the complex interplay of trauma, loss, and acculturative stress. Moreover, the challenges faced by immigrants during the resettlement process are exacerbated by systemic barriers, including language barriers, discrimination, and limited access to resources and social support networks. Against this backdrop, it is imperative to examine the specific stressors encountered by Middle Eastern immigrants in various host countries to inform targeted interventions and support mechanisms tailored to their unique needs. The subsequent section provides a detailed overview of the findings from studies conducted in Canada, the United States, Australia, Europe, offering insights into the mental health implications of migration-related stressors among Middle Eastern immigrants, with more details about each study included in this scoping review within Appendix.

4.1. Canada

Studies in Canada highlight the significant impact of pre-migration trauma and post-migration settlement challenges on the mental health status of refugees. Maximova et al. (2010) found that time spent in refugee camps and occupational background influenced mental health status, while access to settlement services contributed to improvements in both mental and physical health. Wilson et al. (2010) underscored the critical pre-migration stressors faced by newly arrived refugees in Toronto, including exposure to war and violence. Baobaid et al. (2018) suggested the need for more focused efforts to assist refugees with their mental health struggles and the exhausting migration process they undergo before settling in Canada.

4.2. The United States of America

In the United States, research reveals the detrimental effects of pre- and post-migration factors, as well as the period of migration, on the health of Middle Eastern immigrants. Jamil et al. (2002) indicated a need for further research on immigrants with traumatic histories to facilitate effective treatments. Jamila et al. (2010) found that exposure to the Gulf War and environmental stress, with unemployment directly linked to psychiatric and psychometric disorders among Iraqis residing in Southeast Michigan. Norris et al. (2011) highlighted higher suicidal rates among certain groups of immigrant women, underscoring the significance of post-immigration-related stressors on overall health.

4.3. Australia

Studies conducted in Australia shed light on the unique stressors faced by asylum seekers from the Middle East. Silove et al. (1996) found that a significant proportion of asylum-seekers in Sydney had experienced traumatic events such as witnessing killings, being assaulted, or suffering torture and captivity, with over a third meeting the criteria for PTSD. Anxiety scores were associated with female gender, poverty, and conflict with immigration officials. Nickerson et al. (2009) reported higher levels of PTSD and depression symptoms among Mandaean adults from Iraq residing in Sydney, highlighting a lack of knowledge among service providers.

4.4. Europe

Research in Europe has identified significant challenges facing Middle Eastern immigrant populations. Studies in Sweden revealed symptoms of common mental disorders and post-traumatic stress among Middle Eastern refugees, with a notable proportion reporting

experience of torture, physical, or psychological assault (Lindencrona et al., 2008). Similarly, research in Finland highlighted obstacles to integration, including disempowerment, stressor consistency, and lack of robust roles, underscoring the complexities of the resettlement process (Valtonen, 1998).

4.5. Key Findings

Speaking of pre-migration trauma and exposure to violence, numerous studies highlight the enduring impact of pre-migration trauma, such as exposure to war, violence, and conflict, on the mental health of Middle Eastern immigrants. Experiences such as witnessing killings, being assaulted, or suffering torture and captivity were prevalent, contributing to elevated rates of PTSD, anxiety, and depression (Silove et al., 1996; Nickerson et al., 2009; Wilson et al., 2010). These findings underscore the need for trauma-informed care and specialized mental health services to address the unique needs of this population.

Post-migration stressors and acculturative stress presented numerous challenges that can exacerbate existing mental health issues and hinder integration, such as unemployment, poverty, language barriers, discrimination, and lack of social support networks. Factors such as unemployment, poverty, language barriers, discrimination, and lack of social support networks were identified as significant post-migration stressors across various host countries (Jamila et al., 2010; Norris et al., 2011; Lindencrona et al., 2008; Valtonen, 1998). These findings highlight the importance of comprehensive settlement services, community support, and culturally responsive interventions to facilitate successful integration and promote mental well-being.

Several studies suggest immigrant women from the Middle East faced additional stressors or vulnerabilities during the resettlement process, leading to poorer mental health outcomes and higher rates of suicidal ideation (Norris et al., 2011; Silove et al., 1996). These findings underscore the need for gender-responsive interventions and support services that address the unique challenges faced by immigrant women from the Middle East.

Researchers consistently identified limited access to mental health services and support networks as a barrier to addressing the psychological distress experienced by Middle Eastern immigrants (Maximova et al., 2010; Nickerson et al., 2009).Improving access to culturally competent mental health services and fostering community-based support systems is crucial to promoting the well-being of this population.

These findings have significant implications for practice and policy, emphasizing the need for tailored interventions, culturally responsive services, and comprehensive support systems to address the mental health needs of Middle Eastern immigrants. By acknowledging and addressing the unique stressors and challenges faced by this population, host countries can promote successful integration, foster resilience, and ensure the well-being of immigrant communities.

5. Discussion

This scoping review represents a pioneering effort to examine the impact of pre-settlement and post-settlement stressors on the mental health of Middle Eastern immigrants settling in North America, Australia, and Europe (Arksey & O'Malley, 2005; Levac et al., 2010; Tricco et al., 2016). To the best of the author's knowledge, no previous scoping review has specifically addressed this research question across these three continents. Moreover, while previous studies have explored the mental health challenges faced by immigrant populations, few have focused exclusively on Middle Eastern immigrants from war-torn countries (Baobaid et al.,

2018). This study fills a critical gap in the literature by shedding light on the unique stressors experienced by this population during the migration process.

A notable aspect of this scoping review is its exclusion of Arab-North African immigrant populations, despite their cultural similarities with Middle Eastern countries. This deliberate focus ensures the coherence and relevance of the study's findings to the experiences of individuals from conflict-affected regions (Baobaid et al., 2018). By narrowing the scope to Middle Eastern immigrants, the study provides a nuanced understanding of the specific stressors and mental health implications associated with war-related migration experiences.

The findings of this scoping review underscore several knowledge gaps that warrant attention from researchers and service providers working with Middle Eastern immigrants. Firstly, there is a notable lack of cultural competence and understanding among healthcare and social services providers regarding the experiences of Middle Eastern immigrants (Silove et al., 1997). Many professionals struggle to grasp the complexities of immigrants' pre-migration trauma and post-settlement challenges, leading to suboptimal care delivery. Furthermore, language barriers and cultural differences exacerbate the difficulty of addressing the mental health needs of this population, highlighting the need for culturally sensitive interventions and training programs for service providers.

Secondly, there is a conspicuous absence of tailored programs and support services specifically designed to meet the needs of Middle Eastern immigrants, particularly those with histories of war-related trauma (Baobaid et al., 2018). Despite being the most populous group of immigrants in recent decades, Middle Eastern immigrants often face a dearth of resources and support networks upon resettlement in host countries. This deficiency underscores the need for the development and implementation of immigrant-specific programs that address the unique challenges faced by this population. These programs should prioritize trauma-informed approaches and culturally sensitive interventions to effectively support the mental health and well-being of Middle Eastern immigrants.

Moving forward, future research should aim to address these knowledge gaps by conducting longitudinal studies that track the mental health trajectories of Middle Eastern immigrants over time (Silove et al., 1997). Additionally, qualitative research methodologies can provide valuable insights into the lived experiences of immigrants and elucidate the contextual factors that shape their mental health outcomes. Furthermore, collaborative efforts between researchers, policymakers, and community stakeholders are essential to develop and implement evidence-based interventions that promote the mental health and integration of Middle Eastern immigrants into host societies (Baobaid et al., 2018).

5.1. Implications for Research, Practice, and Policy

The findings of this scoping review underscore the pressing need for culturally sensitive interventions and support services tailored to the unique experiences and needs of Middle Eastern immigrants. Given the significant mental health challenges faced by this population, including elevated rates of anxiety, depression, PTSD, and suicidal ideation, it is imperative that healthcare providers and community organizations adopt a trauma-informed approach that acknowledges the impact of pre-migration trauma and post-settlement stressors.

Mental health service providers should be equipped with the necessary training and resources to address the multifaceted challenges faced by immigrants during the resettlement process (Lou & Beaujot, 2005; Kirmayer et al., 2011). Additionally, future research should prioritize longitudinal studies to examine the long-term trajectories of mental health outcomes among

Middle Eastern immigrants, taking into account factors such as social support, coping mechanisms, and access to healthcare services.

One crucial recommendation is the development of comprehensive mental health assessments that consider the full spectrum of experiences faced by Middle Eastern immigrants, including pre-migration exposures, stressors during migration, and post-migration resettlement challenges (Kirmayer et al., 2011). These assessments should be culturally grounded, incorporating an understanding of the unique cultural, religious, and social contexts that shape the mental health experiences of this population. By conducting thorough and culturally sensitive assessments, healthcare providers can gain a holistic understanding of the barriers and facilitators to mental well-being, enabling the delivery of targeted interventions and support services.

Furthermore, there is a critical need for community-based initiatives that foster social integration and promote resilience among immigrant populations. Collaborative efforts between governmental agencies, non-profit organizations, and community stakeholders can facilitate the development of culturally appropriate support networks and resources to address the psychosocial needs of Middle Eastern immigrants (Kirby, 2008). These initiatives may include peer support groups, cultural events, and educational programs that raise awareness about mental health and available resources. Engaging community leaders and stakeholders in the design and implementation of these initiatives is crucial to ensure cultural relevance and acceptance within the target populations. Moreover, policymakers should advocate for policies that promote inclusive practices and combat systemic barriers to access to mental health care for immigrant populations.

The findings of this scoping review also highlight the need for comprehensive policy reforms to address the mental health challenges faced by Middle Eastern immigrants. Policymakers should prioritize the development of inclusive policies that dismantle systemic barriers and ensure equitable access to culturally competent mental health services. This may involve allocating dedicated funding for the training and employment of multilingual and culturally diverse mental health professionals, as well as the establishment of community-based mental health clinics within immigrant enclaves. Furthermore, policies should mandate the integration of trauma-informed approaches and culturally responsive assessments within healthcare systems, ensuring that the unique experiences and needs of Middle Eastern immigrants are acknowledged and addressed. Collaboration between government agencies, healthcare providers, and community stakeholders is crucial in developing and implementing these policies. Additionally, policies should support the creation of robust social support networks and community-based initiatives that foster resilience, social integration, and overall well-being among Middle Eastern immigrant populations. By addressing systemic barriers and promoting inclusivity through evidence-based policies, host countries can create an environment conducive to the successful resettlement and long-term mental health of Middle Eastern immigrants.

5.2. Limitations

While this scoping review provides valuable insights into the mental health challenges faced by Middle Eastern immigrants, several limitations should be acknowledged. Firstly, the reliance on existing literature may have introduced publication bias, as studies with null or non-significant findings may be underrepresented (Arksey & O'Malley, 2005). Additionally, the exclusion of studies published before 1995 may have limited the historical perspective on migration-related stressors among Middle Eastern immigrants (Arksey & O'Malley, 2005). Furthermore, the heterogeneity of study methodologies and sample characteristics across the

included studies may have influenced the generalizability of the findings (Levac et al., 2010). Moreover, the strict inclusion and exclusion criteria employed in this review may have inadvertently excluded relevant studies, potentially overlooking important insights into the mental health implications of pre-settlement and post-settlement stressors among Middle Eastern immigrants (Arksey & O'Malley, 2005). Finally, the geographic focus on North America, Australia, and Europe may limit the applicability of the findings to other regions with distinct socio-cultural contexts and immigration policies (Tricco et al., 2016).

5.3. Future Directions

Future research endeavors should aim to address the multifaceted nature of pre-settlement and post-settlement stressors on immigrant mental health through the adoption of a mixed-methods approach. While quantitative studies offer valuable insights into the prevalence and statistical associations of stressors, qualitative methodologies can provide a deeper understanding of the subjective experiences and narratives of Middle Eastern immigrants (Levac et al., 2010). By integrating both quantitative and qualitative approaches, researchers can capture the complexity and nuances of immigrant mental health trajectories, shedding light on the underlying mechanisms and contextual factors that influence these outcomes.

Moreover, longitudinal studies are essential to track the trajectories of mental health outcomes among Middle Eastern immigrants over time (Tricco et al., 2016). Understanding how these outcomes evolve throughout the resettlement process is crucial for identifying critical periods of vulnerability and resilience. Longitudinal research can elucidate the long-term effects of pre-migration trauma and post-migration stressors on mental health outcomes, offering valuable insights into the factors that contribute to resilience and recovery.

In addition to quantitative and longitudinal approaches, qualitative research methodologies such as in-depth interviews and focus groups hold immense promise in uncovering the lived experiences of immigrants (Levac et al., 2010). These methodologies allow researchers to explore the cultural, social, and contextual factors that shape immigrants' mental health trajectories. By engaging directly with immigrants and soliciting their perspectives, researchers can gain a deeper understanding of their needs, challenges, and coping strategies. Qualitative research can also illuminate the role of social support networks, cultural identity, and acculturation processes in shaping mental health outcomes, providing valuable insights for the development of culturally sensitive interventions and policies.

Overall, future research endeavors should embrace a multidimensional and interdisciplinary approach to studying immigrant mental health. By integrating quantitative and qualitative methodologies, as well as longitudinal studies, researchers can advance our understanding of the complex interplay between stressors and mental health outcomes among Middle Eastern immigrants. This comprehensive approach has the potential to inform targeted interventions, policies, and services aimed at promoting the well-being and resilience of immigrant populations in host countries.

6. Conclusion

This exploratory study identified the need for a scoping review to implement systematic research to answer clear hypotheses to address future research needs in the field of immigration among Middle Eastern immigrants specifically. The study took a look at the impact of pre-settlement and post-settlement stressors on the mental health of Middle Eastern immigrants settling in North America, Australia, and Europe.

Future scoping studies may consider further expanding this scope to different continents rather than only three. This may propose some difficulties as the three selected continents in this study are considered the world's leading nations in mental health services and mental health services along with it being a very popular hub for Middle Eastern immigrants around the world. However, the rest of the world's nations may offer further research and evidence that are not covered by this study, especially when considering the fact that North America, Australia, and Europe have very strict, extensive, and expensive immigration procedures that result in turning away thousands of Middle Eastern individuals to other parts of the world where the movement for both legal and illegal migration is significantly easier accessible and more affordable.

This scoping review is only the beginning to an entire process of expanding the current knowledge and improve the current services to accommodate Middle Eastern immigrants better. The next major step for researchers is to conduct further interviews and deeper research among Middle Eastern immigrants in those three continents to bring clear knowledge of the types of pre-settlement and post-settlement stresses those immigrants are facing. There also needs to be further evidence of the mental health issues and illnesses those immigrants are facing as a result of their pre-migrant and post-migration process. As this may take a great period before getting achieved, direct and specific services and more appropriate understanding of Middle Eastern immigrants cannot take place without meeting these goals as they will be a guide to implement and train professionals to serve our Middle Eastern population of immigrants better.

References

Arksey, H., & O'Malley, L. (2005). Scoping Studies: Towards a Methodological Framework. *International Journal of Social Research Methodology: Theory & Practice, 8*(1), 19–32. https://doi.org/10.1080/1364557032000119616

Baobaid, M., Ashbourne, L., Tam, D., Badahdah, A., Al Jamal, A. (2018). Pre- and Post-Migration Stressors and Marital Relations among Arab Refugee Families in Canada. *Doha International Family Institute.* https://doi.org/10.5339/difi_9789927137983

Cooper, H. (2017), Research Synthesis and Meta-Analysis: A Step-By-Step Approach, 5th ed., Sage, Thousand Oaks, CA. https://doi.org/10.4135/9781071878644

Jamil, H., Hakim-Larson, J., Farrag, M., Kafaji, T., Duqum, I., & Jamil, L. H. (2002). A retrospective study of Arab American mental health clients: Trauma and the Iraqi refugees. *American Journal of Orthopsychiatry*, *72*(3), 355-361. https://doi.org/10.1037/0002-9432.72.3.355

Jamil, H., Nassar-McMillan, S., Lambert, R., Wang, Y., Ager, J., & Arnetz, B. (2010). Pre-and post-displacement stressors and time of migration as related to self-rated health among Iraqi immigrants and refugees in Southeast Michigan. *Medicine, Conflict and Survival*, *26*(3), 207-222. https://doi.org/10.1080%2F13623699.2010.513655

Kirby, M. (2008). Mental health in Canada: out of the shadows forever. *Cmaj*, *178*(10), 1320-1322. https://doi.org/10.1503/cmaj.071897

Kirmayer, L. J., Narasiah, L., Munoz, M., Rashid, M., Ryder, A. G., Guzder, J., & Pottie, K. (2011). Common mental health problems in immigrants and refugees: general approach in primary care. *Cmaj*, *183*(12), E959-E967. https://doi.org/10.1503/cmaj.090292

Levac, D., Colquhoun, H. and O'Brien, K.K. (2010). Scoping studies: advancing the methodology. *Implementation Science,* Vol. 5 No. 1, pp. 69-77. https://doi.org/10.1186/1748-5908-5-69

Li, S. S., Liddell, B. J., & Nickerson, A. (2016). The relationship between post-migration stress and psychological disorders in refugees and asylum seekers. *Current psychiatry reports*, *18*(9), 82. https://doi.org/10.1007/s11920-016-0723-0

Lindencrona, F., Ekblad, S., & Hauff, E. (2008). Mental health of recently resettled refugees from the Middle East in Sweden: the impact of pre-resettlement trauma, resettlement stress and capacity to handle stress. *Social psychiatry and psychiatric epidemiology*, *43*(2), 121-131. https://doi.org/10.1007/s00127-007-0280-2

Lou, Y., & Beaujot, R. (2005). What happens to the 'Healthy immigrant effect' : the mental health of immigrants to Canada. *PSC Discussion Papers Series*, *19*(15), Retrieved from https://ir.lib.uwo.ca

Maximova, K., & Krahn, H. (2010). Health status of refugees settled in Alberta: changes since arrival. *Canadian Journal of Public Health/Revue Canadienne de Sante'e Publique*, 322-326. https://doi.org/10.1007%2FBF03405295

Miller, K. E., & Rasmussen, A. (2010). War exposure, daily stressors, and mental health in conflict and post-conflict settings: bridging the divide between trauma-focused and psychosocial frameworks. *Social science & medicine*, *70*(1), 7-16. https://doi.org/10.1016/j.socscimed.2009.09.029

Nickerson, A., Bryant, R. A., Steel, Z., Silove, D., & Brooks, R. (2010). The impact of fear for family on mental health in a resettled Iraqi refugee community. *Journal of Psychiatric Research*, *44*(4), 229-235. https://doi.org/10.1016/j.jpsychires.2009.08.006

Norris, A. E., Aroian, K. J., & Nickerson, D. M. (2011). Premigration persecution, postmigration stressors and resources, and postmigration mental health: a study of severely traumatized US Arab immigrant women. *Journal of the American Psychiatric Nurses Association*, *17*(4), 283-293. https://doi.org/10.1177%2F1078390311408900

Porter, M., & Haslam, N. (2005). Predisplacement and postdisplacement factors associated with mental health of refugees and internally displaced persons: a meta-analysis. *JAMA*, *294*(5), 602–612. https://doi.org/10.1001/jama.294.5.602

Silove, D., Sinnerbrink, I., Field, A., Manicavasagar, V., & Steel, Z. (1997). Anxiety, depression and PTSD in asylum-seekers: assocations with pre-migration trauma and post-migration stressors. *The British Journal of Psychiatry*, *170*(4), 351-357. https://doi.org/10.1192/bjp.170.4.351

Tricco, A. C., Lillie, E., Zarin, W., O'Brien, K., Colquhoun, H., Kastner, M., & Kenny, M. (2016). A scoping review on the conduct and reporting of scoping reviews. *BMC medical research methodology*, *16*(1), 15. https://doi.org/10.1186/s12874-016-0116-4

UNHCR. UNHCR mid-year trends 2015. UNHCR, Geneva. 2015. http://www.unhcr.org/56701b969.html (Accessed 1 January 2024).

Valtonen, K. (1998). Resettlement of Middle Eastern refugees in Finland: The elusiveness of integration. *Journal of refugee studies*, *11*(1), 38-60. https://doi.org/10.1093/jrs/11.1.38

Wilson, R. M., Murtaza, R., & Shakya, Y. B. (2010). Pre-migration and post-migration determinants of mental health for newly arrived refugees in Toronto. *Canadian Issues*, 45. http://accessalliance.ca/wp-content/uploads/2018/06/Determinants-of-health-for-refugees.pdf

Appendix

Citation	Sampling frame	Response rate	Country of study	Key findings
(Silove et al., 1996)	(n=40) asylum-seekers are attending a community resource center in Sydney, Australia, were interviewed using structured instruments and questionnaires.	NR	Australia	• Anxiety scores were associated with female gender, poverty, and conflict with immigration officials • (79%) had experienced a traumatic event such as witnessing killings, being assaulted, or suffering torture and captivity • (37%) met full criteria for PTSD
(Jamil et al., 2002)	(n=375) clients were examined at a clinic that serves Arab Americans	74%	USA	• Need for further research on immigrants with traumatic histories to facilitate effective treatments • Unclear whether the greater number of problems are due to premigration stressors, post-migration stressors, or some interaction of the two
(Nickerson et al., 2009)	A cross-sectional survey of Mandaean (n=315) adults from Iraq, living in Sydney, Australia, was interviewed	86%	Australia	• Higher levels of symptoms of PTSD and depression, and greater mental health-related disability than those without family in Iraq • Service providers lack knowledge
(Maximova et al., 2010)	Using linear regression, the associations between pre- and post-migration factors and changes in self-rated mental and physical health status were examined in (n=525) refugees	NR	Canada	• Having spent time in a refugee camp and has held professional/managerial jobs in one's home country were associated with a greater decline in mental health status since arrival in Canada • A higher number of settlement services received during the first year in Canada was associated with greater improvements in both mental and physical health status
(Jamila et al., 2010)	A random sample of Iraqis residing in Southeast Michigan, US, was interviewed using an Arab language structured survey (n=350)	95%	USA	• Pre-as well as post-migration factors, and period of migration affect health. • Exposure to the Gulf War and environmental stress created poor health • Unemployment had a direct path to psychiatric and psychometric disorders
(Norris et al., 2011)	Descriptive; multinomial logistic regression. Subclinical Symptoms. (n=519)	81.6%	USA	• Post-immigration related stressors have a very strong effect on the overall health of immigrant women • Higher suicidal rates among groups of women
(Valtonen, 1998)	N/A	NR	Finland	• Major obstacles to be negotiated before they can attain a level of participation that is compatible with immigrants' own resettlement goals • Disempowerment, stressor consistency and lack of robust roles which were dysfunctional to the integration process to those immigrants

Citation	Sampling frame	Response rate	Country of study	Key findings
(Lindencrona et al., 2008)	(n=124) Middle Eastern refugees who had their permanent resident status in Sweden	80%	Sweden	• Symptoms of common mental disorders and core symptoms of post-traumatic stress were found • 40% reported torture, physical, or psychological assault • High level of symptoms of the common mental disorder can be identified
(Wilson et al., 2010)	N/A	NR	Canada	• Newly arrived refugees in Toronto have faced critical pre-migration stressors including war and violence • Pre-migration determinants, particularly gaps in educational and economic opportunities in post-migration stressors that refugees face
(Miller et al., 2010)	N/A	NR	USA	• Relevance and impact of mental health or psychosocial interventions are likely to be considerably enhanced when they are seen as targeting those sources of stress • Programmatic focus on healing the effects of previously experienced war exposure is likely to have limited impact on individuals who are facing ongoing exposure to traumatic stress in their homes or communities.