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Education, employment and mental health outcomes for Syrian refugee newcomers

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Between November 4, 2015 and June 30, 2018, Canada relocated and resettled over 56,000 Syrian refugees nationwide. Syrian newcomers vary widely in terms of their socioeconomic (SES) backgrounds, previous employment, qualifications, and education. It is often assumed that those with higher levels of education will find integration easier because they are better able to learn English/French and are more likely to find employment. However, past research finds that mental health outcomes for refugees are poorest for those with the highest pre-migration socio-economic status. As part of a national longitudinal study with Syrian refugees, the Syrian Refugee Integration and Long-Term Health Outcomes in Canada project (SyRIA.lth), we are exploring this phenomenon to better understand the gap between employment expectations and outcomes among almost 2,000 Syrian refugees across Canada, and the consequences it can have for newcomer mental health.

Employment and poverty have been identified as key determinants of health and are common challenges in refugee integration.^{5,6} Employment is essential for newcomers to support their families, rebuild their lives in Canada, and reestablish themselves as contributing members of society. Because of the role employment plays in one's sense of self-worth and social status, unemployment has been found to have direct effects on mental health.^{4,7} Refugees who are actively seeking employment, but are unable to attain employment, are at greater risk for depression and social withdrawal. Over time this could contribute to poorer mental and physical health.⁶

The issue is not just about finding employment, however, but about finding appropriate employment.⁸ As with other newcomers, Syrian refugees may struggle to find employment that commensurate with their skills, experiences, and qualifications, and this may be more challenging for those with higher qualifications. One longitudinal Canadian study found that refugees with higher education and qualifications are more likely to be over-qualified when and if they find employment.⁸ Moreover, those who perceived themselves to be more over-qualified for their current jobs demonstrated the greatest decline in mental health.⁷



Poorer mental health outcomes may be partially due to greater inconsistencies between pre-migration expectations and post-migration outcomes, compared to other migratory groups.⁹ Immigrants choose whether and when to migrate, and can prepare for migration in terms of securing appropriate education, training, accreditation and information, and, in Canada, are often selected on the basis of their perceived fit with economic opportunities in the country.^{5,6} Refugees are forced to leave their country of origin with little choice or preparation, have little choice over where they move to, and often leave behind many of their economic resources.⁶ As a result, they are less likely to speak the language of the country they migrate to, often cannot bring or provide evidence of skills, training or accreditation, and may not have the skills needed or appropriate for the country they move to.² These circumstances place refugees at a disadvantage when seeking employment and at greater risk for poorer mental health and well-being.^{4,9} However, most research examining pre-migration SES, expectations, and well-being among refugees has been cross-sectional and has not followed refugees over an extended period of time.^{8,10,11} With current Syrian integration initiatives in Canada, there is more opportunity to explore the relationships between past socioeconomic status, education backgrounds, expectations, and post-migration employment experiences. Understanding how different resettlement conditions predict successful pathways to integration for diverse newcomers can help us strengthen resettlement support to assure their long-term well-being.⁹

For clinicians working with Syrian refugees, it is important to consider the quality and experiences of post-migratory conditions for individuals and their families.^{9,10} Although the manner of refugees' arrival in Canada leads us to have concerns about premigration trauma, such as experiencing war and conflict, the impact of these pre-migratory stressors may be mitigated and decreased over time in the presence of favourable post-migratory conditions.¹² Thus, it has been recommended that a multi-modal approach be used for refugee newcomers with mental health concerns that combines therapy (i.e., pre-migratory trauma) with assistance surrounding practical issues regarding post-migratory experiences.⁹

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