UNIVERSITY OF PADOVA

Department of Philosophy, Sociology, Education and Applied Psychology

Master's degree in clinical, Social and Intercultural Psychology

Final dissertation

Separated by Seas, United in Strength: A Reflexive Thematic Analysis of Nigerian and Venezuelan Refugee Women's Migration Narratives

Supervisor
Prof.ssa Sara Mondini

Co-supervisor
Dott. Giacomo Chiara

Candidate: Andrea Castellanos Ibarra
Student ID number: 2071274

Academic Year 2023/2024

Abstract

This study analyzes refugee women's migration journey and lives from Venezuela and Nigeria, seeking to compare and co-construct their narratives. These refugees faced numerous social and psychological obstacles, including traumatic migration journeys, racism, and difficulties in integration into the new country. To obtain this information, episodic interviews were conducted with eight participants in their native languages (English and Spanish). They were later transcribed and analyzed with a reflexive thematic analysis considering a socio-constructivist and intercultural approach. The analysis shows a dominant narrative of seeking stability, survival, and safety as a central theme between all the interviewees. At the same time, there is a difference in their migration journey and adaptation to the host country. Lastly, through the interviews, the narratives are co-constructed among all the participants, emphasizing their resilience and empowerment. Thus, it is concluded that the interviewer's role in highlighting their migration journey, as well as their resilience and achievements, contributes to a more empowering narrative construction for some participants. Additionally, it is seen that these narratives could be further empowered by addressing systemic barriers and advocating policy changes.

A mi **hermosa abuelita Margarita** por darme fortaleza y vida a través de la suya, por enseñarme lo que es el verdadero amor ese que se entrega de manera desinteresada y total. Por demostraste con tus acciones diarias y tu ejemplo, que cuando se hacen las cosas con el corazón, no hay obstáculo lo suficientemente grande que no pueda ser superado. Me regalaste la certeza de que el amor auténtico es la fuerza más poderosa y transformadora.

A **mi Padre Francisco** que desde temprana edad me impulsó a creer en mí. Con sabias palabras y un apoyo constante, me enseñaste a resolver los problemas con valentía y determinación, y a no temerle a los momentos difíciles. Con unas simples palabras, "esto también pasará", me diste la fortaleza para enfrentar la vida sin perder" Gracias por infundirme esa confianza y templanza que han sido esenciales en mi camino.

A **mi Madre Gabriela**, por ser mi compañera y amiga. Gracias por ser ese puerto seguro donde siempre encontré consuelo, donde pude retomar fuerzas y aliento cada vez que la vida me sacudía. Cada vez que me sentí derrumbada, tu amor y tu apoyo me ayudaron a levantarme y a continuar con más ímpetu que antes. Eres esa luz que me guía, que me acompaña y que me recuerda que siempre hay un camino de regreso al hogar.

A ambos por amarme y apoyarme incondicionalmente, por construirme unas alas enormes que me permitieron volar y ver que ni siquiera el cielo es el límite. Por darlo todo para que a mí nunca me faltara nada aún en momentos tan difíciles. Por enseñarme lo que es la verdadera resiliencia. Solo tengo amor, agradecimiento y admiración hacia ustedes.

A mis hermanos por levantarme cada que creía que no podía más, por todas las veces que me escucharon y me alegraron el día a distancia sin saber los difícil que estaba siendo para mi estar lejos de mi hogar. Gracias por escucharme, por su cariño incondicional y por todas las lecciones que aprendí de cada uno de ustedes. Su ejemplo ha sido un modelo a seguir y una fuente constante de inspiración.

A cada persona que en estos dos años me brindó su mano y su apoyo, haciendo de este viaje que a veces se volvió tan complicado y turbulento, una experiencia más llevadera y feliz. Gracias por ser mi familia y mi hogar lejos de casa, por darme un lugar donde encontrar refugio y una sonrisa sincera en medio de la tormenta.

A México, mi tierra, mi origen y mi esencia. Gracias por ser mi hogar, ese lugar que llevo en el alma y al que siempre deseo volver. Aunque la distancia me haya separado físicamente, siempre ocuparás un rincón especial en mi corazón.

A **mi pequeña Andrea** que siempre soñó con hacer un cambio en el mundo gracias por tu valentía, por tu curiosidad. A mi yo de 18 años que con miedo se atrevió a hacer las cosas diferente y romper los moldes. A Andrea del 2024 estoy profundamente orgullosa de lo que has logrado. No solo por los éxitos visibles, sino por las batallas internas que has enfrentado. Gracias por cada paso firme que diste y por cada error del que te levantaste con más sabiduría y más ganas de crecer. Hoy celebro no solo lo que has alcanzado, sino también el camino que has recorrido. Cada decisión difícil, cada sacrificio, y cada noche de incertidumbre valieron la pena porque has demostrado que todo es posible. Sigue creyendo en ti, sigue persiguiendo lo que amas y recuerda siempre que tu esencia es tu mayor fortaleza.

Table of contents

Chapter 1: Immigration Phenomena

1.1 Definition of immigration phenomena

When discussing immigrants, we often use the terms migration and immigration interchangeably. However, it's important to distinguish between the two. Migration refers to the movement from one place to another, whether within the country or outside of it (Nante et al., 2016, p. 424). This movement can be involuntary (e.g., due to armed conflicts or natural disasters) or voluntary (e.g., for academic opportunities) and is often temporary. On the other hand, immigration explicitly to international migration is usually permanent in nature. It encompasses refugees, displaced persons, uprooted people, economic migrants, and others.

Considering the work of Algerian French sociologist Abdelmalek Sayad (Sayad et al., 2004), the dual experience of immigration and emigration is relevant. This highlights that any migratory movement involves a complex relationship between the society that the person leaves and the one it enters.

Immigration results in a presence, and emigration finds expression in an absence. A presence makes itself felt; an absence is noted, and that is all. A presence can be adjusted, regulated, controlled, and managed. An absence is masked, compensated for, and denied. These differences in status determine the differences in the discourses that can be applied to both presence (immigration), which is amenable to discourse, and absence (emigration), of which there is nothing to be said except that it must be supplemented. (Sayad, 2004, p.120).

Therefore, immigration is commonly perceived as an incidental occurrence that may be deemed acceptable or legitimate if it aligns with the community's interests. Furthermore, the bilateral relations between the countries of emigration and immigration explain migrants' loss or retention of rights in their country of emigration.

This is evident in the discourse surrounding the costs and benefits of immigration, as emphasized by Sayad. Moreover, migrants are often depicted as individuals who benefit from society without making substantial contributions (Sayad, 2004, p. 76–80).

Additionally, Sayad shows that migration is mainly described as temporary, while it happens that migrants eventually settle in. In fact, migration calls into question the distinction between the temporary and the permanent, creating what Sayad (2004, p.125) termed the 'impossible ubiquity' of the emigrant-immigrant, who is neither absent from the emigration community nor present in the immigration one. This constant presence of migrants, perceived as unpredictable and temporary, justifies the unequal status between citizens and resident foreigners, maintaining the latter in a situation of legal and political domination, including discrimination and lack of representation.

However, this position is contradictory as it opposes the government's supposed aim of making migrants feel at home. Wanting immigrants to be effectively 'at home' and not 'as if they were home,' that is to say, falsely at home because they are in reality 'at someone else's place', at our place' [chez nous], requires that we give them the means and reasons to feel at home or, better still, that we accept that they conquer these same means and reasons, the right to vote to be the condition and the conclusion of all this. (Sayad, 2006b, p.31–32). The challenge is not only to allow immigrants to act or speak out but to make available 'the ability to re-appropriate for oneself the possibility of constructing one's own identity and evaluating that identity in complete autonomy' (Sayad, 2004, p. 288).

Consequently, the author highlights the challenge of shifting perspectives and approaches to immigration due to the persistent influence of post-colonial dynamics within countries. This perpetuates a hierarchical structure, positioning various actors in dominant or subordinate roles. Disregarding this continuity in favor of prioritizing the host country's perspective raises epistemological concerns. From a political standpoint, it signifies the power dynamics between countries, particularly when one has a history of colonization and the other has been colonized. The author consistently underscores the connection between the colonized individuals of the past and today's immigrants.

As the author highlights, immigration represents a global phenomenon driven by a multitude of factors that have been steadily increasing in recent years. In 2015, around 18 million immigrants, including both documented and undocumented individuals, asylum seekers, and refugees, entered new countries. In the past twenty years, there has been a significant increase in the number of people being forcibly displaced worldwide.

As reported by the International Organization for Migration (IOM) (McAuliffe & Oucho, 2024), in the past two years, significant migration and displacement events have caused immense hardship, trauma, and loss of life. Alongside the conflicts in Ukraine and Gaza, millions of people have been displaced due to conflicts in the Syrian Arab Republic, Yemen, the Central African Republic, the Democratic Republic of Congo, Sudan, Ethiopia, and Myanmar.

Furthermore, in 2022 and 2023, large-scale displacements triggered by climate— and weather-related disasters occurred in various parts of the world, including Pakistan, the Philippines, China, India, Bangladesh, Brazil, and Colombia.

Despite recent events, long-term data on international migration has shown us that migration is not consistent worldwide. It is influenced by economic, geographic, demographic, and other factors, leading to distinct migration patterns. For example, migration "corridors" may develop over many years.

In fact, according to the IOM 2023 report, the corridor from Mexico to the United States hosts nearly 11 million people, making it the largest corridor in the world. In 2023, Mexico saw a significant increase in the number of international migrants entering the country, with nearly 44 million people, marking a 132 percent increase since 2020. Most of these migrants intend to reach the western border of the United States. In the same year, there were 2,542,074 recorded migrant encounters at the southwest border of the United States. However, the UN agency has designated the border between the two countries as the most dangerous land migration route globally.

On the other hand, as stated by IOM in 2023, 54% of all registered individuals entered Europe through the Central Mediterranean Route (CMR) to Italy and Malta. Italian authorities recorded 157,652 migrants and refugees arriving by sea, representing a 50% increase from the 2022 figure of 105,131. According to available data from national authorities, the primary nationalities recorded upon arrival in 2023 were Guinea (12%), Tunisia (11%), and Côte d'Ivoire (10%), predominantly departing from Tunisia, followed by Bangladesh (8%) and Egypt (7%), predominantly departing from Libya.

Based on recent data, forced migration has been increasing more rapidly than voluntary migration. Comprehending this situation's difficulties, implications, and outcomes is crucial. Forced migration poses a significant risk for trauma-related

psychological distress and a variety of mental disorders. Upon reaching a new country, immigrants face numerous challenges, including social isolation, unemployment, poverty, language barriers, cultural differences, and stressful living conditions, all of which are potential factors affecting immigrants' health.

On the other hand, Immigration can be crucial in providing a much-needed skills boost, particularly for destination countries experiencing population declines. Moreover, it can potentially enhance national income and average living standards while also positively impacting the labor market by addressing worker shortages in specific sectors and occupations. Research indicates that migrants make significant contributions to global dynamism and are disproportionately represented in areas such as innovation, patents, arts and sciences awards, start-ups, and successful companies.

1.2 Definition of refugee

In the context of immigration, a range of terms is employed to denote individuals who migrate, encompassing immigrants, internally displaced people, asylum seekers, and refugees, among others. While each classification constitutes a component of this complex phenomenon, this paper will focus on individuals holding refugee status.

The 1951 Geneva Convention's definition will be used to ensure a precise understanding of the term, a standard upheld by NGOs such as UNHCR. The 1951 Refugee Convention and its 1967 Protocol serve as pivotal legal instruments that form the framework of UNHCR's operations. They establish the definition of the term refugee and delineate their rights and international standards for their protection. The United Nations Convention relating to the Status of Refugees, established in 1951, is the cornerstone of international refugee protection. It is grounded in Article 14 of the Universal Declaration of Human Rights from 1948, which acknowledges the right of individuals to seek asylum in other countries to escape persecution.

According to the Convention, a refugee is unwilling or unable to return to their home country due to a well-founded fear of persecution based on race, religion, nationality, membership of a particular social group, or political opinion. However, the Convention does not apply to individuals who have committed war crimes, crimes against humanity,

serious non-political crimes, or acts contrary to the purposes and principles of the United Nations.

The Convention is both a status and rights-based instrument and is guided by several fundamental principles, including non-discrimination (to be applied without discrimination as to sex, age, disability, sexuality, or other prohibited grounds of discrimination), non-penalization (refugees should not be penalized for their illegal entry or stay, recognizes that the seeking of asylum can require refugees to breach immigration rules), and nonrefoulement (no one shall expel or return ("refouler") a refugee against his or her will, in any manner whatsoever, to a territory where he or she fears threats to life or freedom).

Thus, The UN Refugee Agency (UNHCR) sets out minimum standards for the treatment of refugees, stating that the rights granted in the convention should not impair any rights and benefits to be granted. It also guarantees rights such as the following:

1. Facilitation of refugee travel acknowledges that the issue and recognition of travel documents are necessary for the movement and resettlement of refugees. This sets forward an agreement with the signing parties to continue to issue, extend, and recognize such travel documents.

2. The principle of unity of the family considers that the unity of a family is a fundamental right of refugees. Therefore, the rights granted to the refugee should also be extended to his family. Thus, governments should have policies to ensure that the refugee's family is maintained, especially protecting minors.

3. Welfare services invite governments to be conscious of the necessity for refugees to have these services, especially those of appropriate non-governmental organizations, and to facilitate the efforts of properly qualified organizations.

4. International cooperation in the field of asylum and resettlement, especially since many people continue to leave the country for reasons of persecution and, therefore, are entitled to special protection.

5. A contracting country shall respect personal status, meaning rights previously acquired by a refugee and dependent on personal status, more particularly rights attached to marriage.

6. Movable and Immovable property refugees should receive treatment that is as favorable as possible and, in any case, not less favorable than the treatment that aliens in similar circumstances receive. This applies to the acquisition of property, rights related to property, and leases and contracts for property.

7. Access to courts: a refugee has the right to access the courts of law in all Contracting States freely. Additionally, they are entitled to the same treatment as a national in matters regarding court access, including legal assistance.

8. Wage-earning employment: The contracting states are expected to extend equitable treatment to the employment rights of all refugees compared to their own nationals, with particular emphasis on refugees who have entered their territory through labor recruitment programs or immigration schemes.

9. In public education, the Contracting States are required to provide refugees with the same treatment as their nationals regarding elementary education. This includes access to studies, recognition of foreign school certificates, diplomas, and degrees, waiving of fees, and awarding of scholarships

10. Labor legislation and social security take into account the following: remuneration, encompassing family allowances if applicable, working hours, overtime arrangements, paid leave entitlements, limitations on remote work, minimum age requirements for employment, apprenticeship and training programs, employment opportunities for women and young individuals, and the entitlement to benefit from collective bargaining. The entitlement to compensation in the event of a refugee's death resulting from a work-related injury or occupational disease should not be contingent upon the beneficiary's residence being outside the host country. Social security provisions encompass legal regulations pertaining to employment injury, occupational diseases, maternity benefits, sickness benefits, disability benefits, old age benefits, death benefits, unemployment benefits, family responsibilities, and any other contingencies covered by national social security schemes following relevant legislation and regulations. (UNHCR - The UN Refugee Agency, n.d.)

Lastly, the convention includes a chapter on administrative measures, which includes the following articles: administrative assistance (Art. 25), Freedom of

movement (Art. 26), Identity papers (Art. 27), Travel documents (Art. 28), Fiscal charges (Art. 29), transfer of assets (Art. 30), Expulsion (Art. 32), Prohibition of expulsion of return (Art. 33) and Naturalization (Art. 34). (UNHCR - The UN Refugee Agency, n.d.)

It is important to note that while this convention establishes the foundation for numerous rights afforded to refugees, it also delineates the general obligations. These encompass the requirement that the refugee adhere to the laws and regulations of the host country and any measures implemented by the host country to uphold public order.

1.3 Phenomena of immigration around the world

Each year, individuals emigrate from their home countries due to unforeseen circumstances, such as natural disasters, armed conflicts, or extreme poverty. A significant portion of today's migration can be attributed to economic factors, either on their own or in conjunction with social and political factors, such as restricted freedom in countries with low levels of democracy.

As a result, migrants are compelled to seek refuge elsewhere, enduring journeys lasting weeks, months, or even years and facing exceedingly challenging and, at times, awful conditions. In many cases, these individuals resort to illegal routes, thus becoming dependent on traffickers and consequently more susceptible to exploitation, abuse, and dangerous living conditions.

For instance, we could take as an example Venezuela, whose socioeconomic and geopolitical crisis has led to the displacement of over 7 million people. This current Venezuelan crisis stands as one of the most significant migration events in the history of Latin America and the Caribbean. The substantial influx of refugee and migrant individuals has placed enormous strain on the institutional response capacities of the majority of host countries.

In essence, a considerable part of this phenomenon is likely a reaction to both "push" factors, which may include life-threatening poverty, natural disasters, environmental degradation, persecution, and war, and safety concerns such as high crime rates. "Pull" factors include educational and employment opportunities, a high standard of living, the

presence of family and friends, a safe environment, and cultural and political freedoms. Additionally, geographical proximity can play a role in determining the destination of migrants, but it is not necessarily the only factor. Social networks may also contribute by facilitating initial contact with the receiving country.

For instance, we could do a brief comparison between Europe and America. Europe has experienced consistent immigration since 1950, with immigration patterns differing across the region. This diversity is attributed to the presence of smaller nation-states, each implementing distinct approaches to immigration. Notably, the Mediterranean countries, namely Spain, Italy, Portugal, and Greece, have witnessed a significant shift from being emigration sources to becoming destinations for migrants.

On the other hand, most of the migration to the US comes from countries to its south. Mexico is the biggest source of immigrants to the US, but a growing number of immigrants are coming from other countries in Central and South America. In recent years, there has been a significant increase in immigration from Latin American countries, making Latin Americans the largest ethnic minority in the US for the first time in history, surpassing African Americans.

As stated above, migration can be caused by various reasons, such as reuniting with family or job opportunities, but this work focuses specifically on forced migration. According to Rossi and Mancini (2016), forced migration is a long-standing process that includes pre-migratory, arrival, and post-migratory phases.

The post-migration stages encompass arrival, early settlement, settlement, and establishment. Each stage presents unique challenges and difficulties that impact the transition to the next phase. For instance, during the early settlement phase, challenges may include acquiring proficiency in a new language, securing employment and housing, and accessing social and health services.

Specific challenges require further exploration in the subsequent settlement phases. Once the initial challenges of early settlement have been overcome, aspects such as individual autonomy (Goodkind and Foster-Fishman, 2002) and social integration (Kirkwood et al., 2014) become critical to the migrant's personal experience and adaptation.

This since the process of migration, whether voluntary or involuntary, presents significant challenges to both individuals and communities, necessitating a fundamental

reorientation of daily life that can lead to profound social, economic, and health implications. While immigration is a result of social determinants such as poverty, employment and educational opportunities, and political oppression, it should also be regarded as a social determinant.

Given that immigration serves as a social determinant, it is imperative to grasp comprehensively the factors that contribute to the well-being and successful adaptation of refugees and those that may hinder these processes.

As previously discussed, the most significant challenges arise after the initial settlement phase. From a psychological standpoint, one of these challenges involves redefinition of the migrant's identity. This is particularly arduous for young adults, as they experience a succession of traumatic events, fractures, and displacements, which may impede their ability to establish a cohesive sense of identity. Additionally, the mental health and well-being of resettled refugees may also be affected during their resettlement process. Nonetheless, several factors may facilitate a smoother transition for specific individuals and 'risk factors' that can pose significant challenges during the process. These include:

Protective factors

- Social support, trust, and mutual understanding between the local host population and migrants can significantly impact the migrant's adaptation process (Konstantinov, 2017; Konstantinov et al., 2022)
- Increasing positive attitudes and social norms and promoting personal contact with refugees can help increase individuals' willingness to provide help and support to refugees (Hellmann et al., 2021).
- Satisfaction of identity needs
- Reduction of stigma and increasing self-acceptance
- Community involvement positively impacts attitudes toward refugees, helps to reduce prejudice, and promotes greater understanding and integration between refugees and the local community (Bajrami et al., 2017).

Risk factors

- Felt stigma or rejection due to a perceived difference from the majority, which reduces the feeling of belongingness and the sense of connectedness to a group

- Perception of not feeling accepted and welcome which prevents the need to feel part of the host country
- Dehumanization of the individual and repetition of traumas due to frequent, intense, and repeated discriminatory experiences

Although this may hold true for many individuals, it is crucial to recognize the diversity of experiences within the immigration context, thus acknowledging the heterogeneity of situations among those undergoing this process. Understanding the unique occurrences and circumstances of the refugee population is vital to offering practical support. Instead of making assumptions about their needs, conducting thorough studies to identify their specific deficiencies and providing more tailored and well-received assistance is imperative.

1.4 Statistics of migration around the world

We rely on two primary sources, the International Organization for Migration (IOM) and the United Nations High Commissioner for Refugees (UNHCR), to gather global migration statistics.

Since 2000, the Internation Organization for Migrations has created the World Migration Reports, which allow to have a better understanding of the outline of global migration, as well as focus on making a relevant, sound, and evidence-based contribution that increases the understanding of migration by policymakers, practitioners, researchers and the general public (IOM, 2021).

The analysis of 24 years' worth of international migration data has led to the conclusion that immigration patterns are not uniform worldwide. Instead, they are influenced by a multitude of factors, including economic, geographic, and demographic considerations. Consequently, diverse migration patterns have evolved over the years.

Thus, the data given by the latest World Migration Report (2024) from the IOM reports that there are currently an estimated of 281 million international migrants, from which 71.4 million are internally displaced people and 35.3 million are refugees. In contrast to the first report given by the IOM 24 years ago in 2000, designed to increase the

understanding of migration by policymakers and the general public, the number of internally displaced people and refugees has risen by 340% and 250%, respectively.

As of the end of 2022, individuals under 18 comprised approximately 41 percent of the total 35.3 million refugee population. In 2022, an estimated 51,700 unaccompanied and separated children applied for asylum, representing an 89% increase from the previous year. Moreover, international remittances have risen from an estimated USD 128 billion to USD 831 billion, emphasizing the significance of international migration as a driver of development.

Regarding the United Nations regions, Europe currently serves as the primary host to international migrants, with 87 million migrants (30.9% of the international migrant population). Asia closely follows with 86 million international migrants (30.5%). Northern America accommodates 59 million international migrants (20.9%), and Africa hosts 25 million migrants (9%). Over the last 15 years, the number of international migrants in Latin America and the Caribbean has more than doubled from around 7 million to 15 million, marking it as the region with the highest growth rate of international migrants and hosting 5.3% of all international migrants.

Before looking into the United Nations High Commissioner for Refugees (UNHCR), it is crucial to understand that UNHCR was established by the United Nations General Assembly in 1950 in response to the aftermath of the Second World War, with a mandate to assist the millions of people who had lost their homes. The agency is responsible for protecting the rights of refugees, including those who have returned to their home country, individuals who have been displaced within their own country, and people who are stateless or have disputed nationality. UNHCR operates under the guidance of the 1951 Refugee Convention and its 1967 Protocol. Additionally, the agency collaborates with countries to enhance and monitor refugee and asylum laws and policies, to ensure the protection of human rights.

When presenting a report, UNHCR divides its data into the following categories:

- Refugees, asylum seekers, and returned refugees include prospective asylum seekers, asylum seekers, recognized refugees, persons with complementary, subsidiary, and temporary forms of protection, and individuals in refugee-like situations. This category also includes children born in the country of asylum to

refugees or asylum seekers who have not acquired citizenship of that country and thus require international protection.

- People in need of international protection: individuals who have been forced to leave their homes and live outside their home country, often across international borders. They may not have been officially classified as asylum-seekers, refugees, or in refugee-like situations. Still, they likely need international protection, including protection against being forced to return to their home country. They also require access to essential services on a temporary or long-term basis. This new category now also includes Venezuelans previously designated as "Venezuelans displaced abroad."

- Internally displaced people: individuals who have been compelled to leave or forsake their homes but have not crossed an internationally recognized border. These individuals flee within their own countries to escape the impact of armed conflict, widespread violence, human rights violations, or natural and man-made disasters.

- Stateless people: Those who meet the statelessness definition in the 1954 Convention are not considered nationals of any state. The second group consists of persons with undetermined nationality.

According to UNHCR data from mid-2023, 110 million people were forcibly displaced worldwide as a result of persecution, conflict, violence, and human rights violations. Of those, 62.5 million are internally displaced people, 36.4 million are refugees, 6.1 million are asylum-seekers, and 5.3 million are people in need of international protection.

The data of the countries used for this research indicate that in 2023, Mexico registered 105,272 refugees under UNHCR mandates, 259,364 asylum-seekers, 262,411 internally displaced people, and 51,156 individuals in need of international protection. Specifically, concerning Venezuela, the statistics indicate 21,241 refugees under UNHCR mandates, 18,962 asylum-seekers, no internally displaced individuals, and 51,156 people needing international protection.

On the other hand, as of the data reported in 2023, Italy is host to 308,663 refugees under UNHCR mandates and 102,028 asylum-seekers. There are zero reported cases of

internally displaced people, and no data is registered for individuals needing international protection.

1.5 Immigration issues

Asylum seekers and refugees are distinct from other migrants due to the involuntary nature of their migration. Unlike voluntary migrants, they have been compelled to leave behind their country, family, community, job, and culture. As called by Alexander Betts, this type of migration is based on survival, meaning people who leave their countries due to an existential threat for which they have no access to a domestic remedy or resolution (Betts, 2013). Their migration has yet to be characterized by practical, psychological, and systematic planning over time. The post-escape migratory phase is often marked by unpredictability, fatigue, and encounters with further traumatic experiences.

UNHCR (2024) defines an asylum-seeker as "someone who is seeking international protection. Their request for refugee status, or complementary protection status, has yet to be processed, or they may not yet have requested asylum, but they intend to do so". On the other hand, as defined by Amnesty International (2024), "a refugee is a person who has fled their own country because they are at risk of serious human rights violations and persecution there." Considering this, it is essential to mention that this research was conducted with people with already approved refugee status. Therefore, the term asylum seeker was not explored in depth.

De Micco (as cited by De Leo et al. 2021) contends that the refugee experience is marked by a suspended and uncertain state wherein individuals find themselves caught between two distinct societies and cultural forms. Those who traverse borders do not merely cross geographical boundaries but also encounter cultural and psychological transitions.

Recent estimates from the World Health Organization indicate that there are at least one billion migrants worldwide. These individuals have been influenced by social determinants in their home countries and now encounter new social, economic, and political circumstances in the countries they have migrated to.

Immigration involves navigating complex adjustments that extend beyond individual adaptation to new cultural and sociocultural contexts. It encompasses a protracted

negotiation process with social, political, and economic structures. Heightened levels of illegal immigration signal insufficient entry controls, thus potentially facilitating activities such as terrorism, organized crime, and trafficking.

Moreover, immigrants may encounter numerous stressors as they acculturate to a new country. These stressors include the severing of ties with family and friends in their country of origin, which can lead to a sense of loss and a diminished capacity for coping. In addition to these personal challenges, immigrants may face specific environmental factors such as discrimination, language barriers, limited social and financial resources, as well as the stress and frustration associated with unemployment or low income. In addition to this, many individuals seeking asylum or refugees have been affected by war or human rights violations experiences, which lead to a significant amount and higher number of traumatic events.

Furthermore, they may experience feelings of alienation within the host society and a sense of disorientation in response to the unfamiliar environment. Immigrants may also grapple with the tension between the influence of traditional norms, values, and customs and those of the new culture. On top of that, in developed countries hosting refugees, studies have explored the connection between various factors in the post-migratory environment and mental health. They have found that increased post-migration stress is linked to higher levels of mental health issues (Laban et al., 2005; Steel et al., 1999, as cited by Carswell et al., 2011). Additionally, a prolonged asylum application process (Laban et al., 2004; Silove et al., 1997; Steel et al., 1999 as cited by Carswell et al., 2011), poor socio-economic living conditions (Laban et al., 2005; Silove et al., 1997 as cited by Carswell et al., 2011), detention (Steel et al., 2006 as cited by Carswell et al., 2011), and limited social support (Schweitzer et al., 2006 as cited by Carswell et al., 2011) have been associated with increased psychopathology. Also, other studies have shown that adaptation difficulties have been identified as a predictor of PTSD symptoms, while the loss of culture and support is a predictor of emotional distress.

Thus, according to Hovey's findings, individuals undergoing acculturation and experiencing heightened levels of acculturative stress are susceptible to significant psychological distress. The term "acculturative stress" encompasses a wide range of

experiences that arise directly from the acculturation process, such as the ones mentioned above.

The model examines the cultural and psychological factors that contribute to varying levels of anxiety and depression. These factors encompass social support within the new community, assistance from immediate and extended family networks, socioeconomic status (SES), premigration variables such as adaptive functioning (self-esteem, coping ability), knowledge of the new language and culture, and the degree of control and choice in the decision to immigrate (voluntary vs. involuntary). Additionally, cognitive attributes, such as expectations for the future (hopeful vs. nonhopeful), religiosity, and the nature of the larger society—including the level of tolerance for and acceptance of cultural diversity within the new environment—are considered.

The following findings emerged when looking precisely at the two host countries under consideration for this research (Mexico and Italy) and the refugees seeking settlement there (from Venezuela and Africa).

The first qualitative study focused on the refugee experience of asylum seekers in Italy, trying to find protective and risk factors intertwining. The following research reported that forced migrants often endure profound trauma resulting from exposure to war-related violence, sexual assault, torture, incarceration, genocide, and other pervasive threats. This traumatic history often correlates with heightened risk factors for depression, post-traumatic stress disorder (PTSD), and anxiety within refugee communities.

A study by Schick et al. (2016) underscored the myriad challenges displaced people face, including navigating personal histories, uncertain residential status, social and familial detachment, integration into unfamiliar societal structures, and language barriers. Factors such as ambiguous migratory trajectories, idealized expectations concerning host countries, and isolation can pose substantial barriers to adjustment within the new social context, thereby impeding the inclusion process.

Another cross-sectional study with a sample of 503 subjects in Italy whose field of study was the experience of violence among immigrants and refugees. Reported that overall, 46.% and 40% of the sample experienced some form of violence in the host country since their arrival, with the following percentages: 53.2% experienced psychological violence, 40.3% physical violence, 18.9% economic violence, and 6.5%

intimate partner violence. The frequency of violent episodes experienced following arrival in Italy was notably higher among female individuals, those with an extended duration of stay in Italy, and those who had encountered at least one incident of racially discriminatory violence. Conversely, individuals with a secondary or higher level of education, as well as those who did not suffer psychological repercussions from the violence, reported a lower frequency of such episodes.

Upon examining the situation in Venezuela, it is imperative to highlight that the country ranks as one of the most violent globally. Furthermore, human rights violations, including arbitrary arrests, prisoner torture, attacks on journalists, and the excessive use of force, have become widespread practices since the escalation of protests against the Maduro regime in 2017.

The escalating influx of Venezuelans has incited feelings of resentment and xenophobia in certain neighboring nations such as Colombia and Ecuador. While Colombia and Peru advocate for regional cooperation and solidarity to manage the Venezuelan exodus, it appears that many governments in the region are primarily focused on addressing domestic political transitions and crises, hampering their ability to effectively unify foreign policy efforts against the Maduro regime and provide mutual support in receiving and integrating displaced Venezuelan individuals.

In addition to the challenges experienced during their migration journey, Venezuelan women and girls encounter amplified gender-based vulnerabilities. These include heightened exposure to intimate partner violence, sexual assault, and early marriage, as well as instances of sexual exploitation, survival sex, transactional sex, and human trafficking.

Considering the points above, it is crucial to bear in mind the potential factors that can aid the often-vulnerable minority upon their arrival in a new country.
There is a consensus that higher levels of resilience correlate with a reduction in depressive symptoms and other emotional issues. Resilience can assist asylum seekers and refugees in adapting to their circumstances and offer protection against the adverse effects of trauma. Furthermore, as previously outlined, protective factors may help alleviate distress during the acculturation process. Numerous data sets have demonstrated that perceived social support diminishes the detrimental impact of stress on the general population's health.

Challenges in post-migration living, such as social isolation and loneliness, have been associated with the onset of post-traumatic stress disorder in refugees. Nevertheless, social support in the host country may mitigate the impact of pre-migration traumatic events on somatization.

Chapter 2: Culture, psychology, and mental health

2.1 Mental health in the migration process

Migration is shaped by various influences that can be grouped into three categories: macro, meso, and micro factors. **Macro factors** are big-picture issues, such as political instability, conflict, or economic and environmental crises. For example, ongoing civil wars or political repression in a country might force large numbers of people to flee as refugees or asylum seekers to safer regions.

Meso factors operate at a community or societal level. These include things like social networks and advances in communication technology, especially social media. For instance, if a community member shares positive stories and photos from their new life abroad on social media, it can create an appealing image of opportunities in another country, encouraging others to consider migrating.

Finally, **micro factors** are more personal and relate to individuals' specific reasons and motivations for migrating. These might include wanting to find better job opportunities, access quality education, or reunite with family members. For example, a young professional might decide to move abroad to pursue a career in their field or join a spouse already living in another country.

Thus, many migrants consider various factors, such as social and economic conditions, when moving to another country. However, some may not fully understand the consequences of migrating because they are forced to leave their home countries due to precarious conditions. This can lead to emotional difficulties as they leave behind their family and friends, causing feelings of loss and grief. Additionally, immigrants may face challenges such as discrimination, language barriers, limited social and financial resources, and the stress of unemployment or low income.

How migrants adjust to these changes and challenges depends on several factors, including their access to existing social connections from their previous place of residence, how well these connections integrate with those in the new location, and the support these networks can provide in the new social and environmental context.

In the context of acculturation, individuals who migrate often use specific strategies. According to Berry (1997), these strategies include integration, assimilation, separation, and marginalization. Integration involves adopting the cultural norms of the new country while maintaining one's own culture. Assimilation involves adopting the new culture while rejecting one's original cultural norms. Separation involves retaining one's original cultural norms while rejecting the new culture, and marginalization involves rejecting both the new and original cultures.

A review of acculturation strategies revealed that marginalization had the most detrimental effects on the mental health of migrant populations. Integration, which involves adopting both the host culture and one's own, appears to have a more significantly positive effect than assimilation. This is due to the belief that a strong sense of ethnic identity and community can help reduce perceptions of discrimination in host societies. Positive ethnic identity can also buffer and reduce the adverse effects of discrimination. Additionally, the quality of relationships has a direct influence on the mental health of migrants.

The World Health Organization (WHO, 2022) defines mental health as "[…] a state of mental well-being that enables people to cope with the stresses of life, realize their abilities, learn well and work well, and contribute to their community. It is an integral component of health and well-being that underpins our individual and collective abilities to make decisions, build relationships, and shape the world we live in. Mental health is a basic human right. And it is crucial to personal, community and socio-economic development".

Even though having an integration strategy may help with assimilating into a new culture, it's essential to consider that many studies have shown a connection between migration and mental health. Regardless of where individuals are moving, being on the move can potentially negatively impact their mental health, especially if the migration is forced (Hou et al., 2020; Zimmerman, Kiss, & Hossain, 2011).

Additionally, research consistently indicates that increased exposure to pre-migration trauma and post-migration stressors is correlated with anxiety, depression, post-traumatic stress disorder (PTSD), and psychological distress symptoms among refugee populations (e.g., Bogic et al., 2015; Cantekin & Gencöz, 2017; Porter & Haslam, 2005; Schweitzer et al., 2011 as cited by Andisha et al., 2024

In fact, an umbrella review conducted by Turrini et al. (2017 as cited by Andisha et al., 2024) underscored that depression, anxiety, and PTSD symptoms are prevalent among asylum seekers and refugees, affecting up to 40% of these populations.

Also, prior research indicates that forced migration significantly impacts mental health, attributed to migrants' lack of adequate preparation for the migration journey (James et al., 2019, as cited by Carroll et al., 2020). While migrants may anticipate improved safety upon leaving… the actual journey presents its own hazards (UNHCR, 2019, as cited by Carroll et al., 2020). Also, experiencing violent events during migration (Ben Farhat et al., 2018; Poole et al., 2018 as cited by Giacco, 2019) and being subjected to human trafficking (Ottosova et al., 2016; WHO, 2018 as cited by Giacco, 2019) have been associated with poor mental health outcomes after resettlement. Separation from family members either as a result of migration or during the migration process has also been found to have adverse effects on mental health (Miller et al., 2018 as cited by Giacco, 2019).

The consequences of family separation include diminished concentration, feelings of guilt (Williams, 2006; Wilmsen, 2013 as cited by Löbel, 2019), and a sense of powerlessness, particularly concerning the inability to shield families from challenges in their home country (Tingh.g et al., 2017 as cited by Löbel, 2019). Psychiatric studies have explored the impact of family separation, with Nickerson et al. (2010) identifying a link between fear of harm to family members in the country of origin and mental illness. Similarly, Teodorescu et al. (2012) and Schweitzer et al. (2006 as cited by Löbel, 2019) have identified family separation as a significant factor in the development of Post-Traumatic Stress Disorder (PTSD).

The challenging experiences that many asylum seekers and refugees endure during forced migration and the subsequent resettlement process render them susceptible to mental health disorders, notably post-traumatic stress disorder (PTSD), major depression, and anxiety. Consequently, the prevalence of psychological distress and mental disorders among this demographic appears to be generally high, with varying estimates. Factors such as exposure to violence, torture, and other potentially traumatic events during migration, as well as challenges encountered during and after migration, such as life-threatening conditions during travel to resettlement countries, uncertainty surrounding asylum procedures, and diminished social integration, can significantly impact the mental well-being of this vulnerable population and potentially contribute to the prevalence of mental health conditions.

Noteworthy research has indicated higher rates of mental disorders, particularly anxiety and depressive disorders, among long-term resettled refugees (at least five years) compared to those in their initial resettlement phase. Furthermore, immigrants in Europe face an increased risk of undergoing involuntary psychiatric interventions compared to native populations, primarily attributable to cultural, ethnic, and language barriers, which often lead to breakdowns in communication between immigrant patients and mental health care professionals.

Post-migration stressors have been demonstrated to act as mediators and moderators of the influence of pre-migration trauma on the mental well-being of refugee populations (Chen et al., 2017; Dangmann et al., 2021, as cited by Afghan et al., 2024)

During the post-migration phase, refugees and asylum-seekers encounter numerous challenges capable of impeding recovery from pre- and peri-traumatic experiences, exacerbating existing mental health issues, or instigating the onset of new mental health problems over time. These challenges encompass family separation, financial strain, social isolation, ethnic discrimination, loss of social status and identity, language barriers, and lack of social support.

Risk factors arising in the initial settlement period in a host country are associated with food insecurity, housing inadequacy (Dennis et al., 2017; Song et al., 2018 as cited by Giacco, 2019), and dissatisfaction with accommodations, particularly prevalent in refugee camps (Poole et al., 2018 as cited by Giacco, 2019). Prolonged stress and uncertainty induced by an extended asylum-seeking process and an information deficit have been linked to clinically relevant psychological symptoms (Ben Fahrat et al., 2018; Poole et al., 2018 as cited by Giacco, 2019).

Additionally, the uncertainty surrounding asylum decisions has consistently been identified as a factor correlated with compromised mental health in various studies (Ben Fahrat et al., 2018; Leiler et al., 2019; Hvidtfeldt et al., 2019 as cited by Giacco, 2019).

Throughout the process of integration into the host country, numerous risk factors for mental health emerge. These encompass social isolation, unemployment, discrimination, cultural identity struggles, acculturation issues, and downward social mobility. Post-migration stressors, particularly discrimination, have been identified as influential factors that have adverse effects on social integration, ultimately contributing to a heightened prevalence of

mental health disorders. Additionally, acculturation stress in immigrants is associated with increased mental health problems, wherein discrimination functions as a pivotal contributor to this issue. Notably, international evidence underscores that discrimination as a social stressor is causally linked to mental health challenges within migrant populations. Such an association necessitates comprehension within a complex and multifaceted context, particularly within the Latin-American context.

In addition to the previously mentioned factors, specific elements play a crucial role in the post-migration process. The absence of a partner can have a significant impact, as partners often provide love, support, safety, and appreciation to help cope with post-migration stressors. Concerns about family and the inability to reunite with them are among the most commonly mentioned post-migration factors. Studies have reported that family-related issues, such as missing one's family, concerns about family back home, inability to return home, and feelings of loneliness, are associated with higher odds of psychiatric disorders. Furthermore, feelings of loneliness and having a poor social network have been directly linked to mental health difficulties. Poor language skills can also be a consequence of migration and can affect community integration. Individuals with poor language skills may struggle to adapt to the culture, create new networks, access mental health services, or find employment or educational opportunities, which can all harm their mental well-being.

Many qualified refugees struggle to integrate into the labor market due to challenges in proving the validity of their documents in the host country. This can lead them to work in low-status jobs or make them unable to find employment, which may increase poverty and negatively impact their mental health, as well as make them feel unwelcome in the host country. Unemployment has strong correlations with psychiatric illness and symptom severity. Housing difficulties and low social participation have also been identified as significant risk factors for poor mental health.

However, studies have shown that forming a solid connection with the mainstream culture is associated with reduced levels of depression and anxiety. This underscores the significance of creating new group affiliations in the host country in order to lead a psychologically healthy life after immigration (Meca et al., 2020; Tikhonov et al., 2019 as cited by Brance et al., 2024).

Concerning migrants, a recent meta-analysis illustrates that heightened social identification is correlated with reduced symptoms of depression and anxiety (Brance et al., 2023 as cited by Brance et al., 2024).

Evidence indicates that maintaining identification with one's ethnic group post-migration is linked to diminished depressive and anxiety symptoms (Çelebi et al., 2017), as well as decreased psychological distress (Mossakowski et al., 2019). Furthermore, heightened ethnic identification has been demonstrated to promote resilience against the adverse effects of discrimination (e.g., Thibeault et al., 2018, as cited by Brance et al., 2024).

In investigating protective factors for refugee mental health post-immigration, there is a general consensus in the health sciences that robust social networks and interactions are generally associated with improved mental health outcomes (Berkman and Glass, 2000; Berkman and Syme, 1979; Cohen et al., 2001; Cohen and Janicki-Deverts, 2009; Cohen and Wills, 1985; Kawachi and Berkman, 2001 as cited by Löbel, 2019).

As disruptions to social identity resulting from significant life changes can compromise individuals' mental health (Haslam et al., 2018; Jetten et al., 2009 as cited by Brance et al., 2024), the model proposes that possessing multiple group memberships prior to significant life changes is crucial for successful adaptation, for two primary reasons The formation of established group memberships serves as a stabilizing factor, enabling individuals to uphold their sense of identity and connection to their prior social context. Moreover, pre-existing group affiliations can function as a foundation for broadening an individual's social network within a new environment.

An influential determinant of mental well-being is the presence of 'bridging social networks,' encompassing individuals from diverse ethnic backgrounds. Furthermore, fostering a sense of belonging in the host country has been demonstrated to correlate with a diminished propensity for mental disorders. Favorable adjustments in post-migration living arrangements also exhibit an association with reduced likelihood of mental disorders. Notably, social interaction with individuals sharing a common cultural background or coming from the host country exerts a positive influence on the mental health of refugees across all age groups.

Conversely, favorable financial circumstances and higher educational accomplishments in the home country are linked to decreased rates of mental disorders post-migration.

Thus, settlement conditions, access to healthcare, and an expedited and seamless process for securing residency status exert a positive influence on the mental well-being of refugees.

International migration has been identified as a potential contributing factor to mental health disorders. Aside from psychiatric illnesses, psychosocial factors are believed to impact the subjective well-being of immigrants. The correlation between international migration and mental health is influenced by various factors, with self-perceived discrimination potentially playing a significant role.

Irrespective of the duration of residency, a study by Schick et al. (2016) observed a notable lack of social integration for refugees, which did not exhibit substantial improvement even after a residence period of over 10 years. Notably, research consistently presents significant evidence of a decline in the overall mental health of immigrants with prolonged residency in both North America and Europe.

Subsequently, proactive and culturally relevant psychosocial interventions that emphasize the prevention of post-migration stressors or the mitigation of their effects on mental health are imperative. Host communities also play a critical role in promoting factors that support the mental well-being of immigrants, thus serving as a prerequisite for their comprehensive engagement in the new environment.

2.2 American Psychology Association (APA) guidelines and different psychological approaches to trauma

In discussions regarding the mental well-being of refugees, the issue of trauma and the potential for PTSD is consistently raised. This is attributed to the challenging migratory journeys and the adversities endured. It is imperative to recognize that while not all individuals who undergo trauma receive a PTSD diagnosis, many display several symptoms as delineated in pertinent guidelines. Within this demographic, refugees are notably susceptible due to their life experiences and their pre-and post-migratory history. The Diagnostic and Statistical Manual of Mental Disorders, DSM-5 RT version, states that traumatic events can be experienced in various ways: through direct experience, witnessing in person, knowing that a family member has experienced a traumatic event, or being repeatedly or excessively exposed to distressing traumatic events. These events are typically shocking and overwhelming, posing a significant threat to the physical, emotional, or psychological well-

being of the individual and their loved ones, and usually occur suddenly and unexpectedly as a one-time event.

Post-Traumatic Stress Disorder (PTSD) consists of four clusters of symptoms, including intrusive and recurrent memories of the trauma, avoidance of trauma-related stimuli, numbing and negative changes in mood or thoughts related to the trauma, and changes in reactivity and arousal. Furthermore, PTSD can range from relatively mild to completely debilitating and can increase vulnerability to being re-victimized or re-traumatized. Specific individuals and populations are at higher risk, and co-occurring conditions such as substance use and abuse, depression, anxiety, dissociation and dissociative disorders, personality disorders, psychosis, cognitive impairment, self-harm, and suicide are common in PTSD diagnoses. The psychosocial impacts may include homelessness, poverty, and incarceration.

Thus, as the world's refugee crisis grows, there is an increasing need for specialized trauma clinicians, however, there is a shortage of clinicians with training in treating traumatized clients despite the high incidence of trauma exposure and its frequent correlation with psychopathology. In addressing this issue, professional guidelines and resources have been formulated, encompassing a fundamental set of trauma competencies that professionals are required to cultivate to offer trauma-informed services to clients, along with several treatment guidelines.

The guidelines set forth by the IOM in 2011 have reshaped the criteria for developing credible guidance. As outlined in the report, guidelines should: a) be founded on a systematic review of evidence, b) be crafted by experts from diverse disciplines and incorporate input from stakeholders, c) consider patient subgroups and preferences, d) be rooted in a transparent process that mitigates bias and conflicts of interest, e) offer assessments of evidence quality and outcome strength, and f) be periodically revised to ensure currency in light of emerging evidence. One of the most notable implications of these recommendations is the shift toward prioritizing evidence over clinical consensus when making recommendations. (As cited by Hamblen et al., 2019).

As mentioned above, one well-known approach to treating trauma and PTSD is the APA Clinical Practice Guideline for the Treatment of PTSD. This guideline provides recommendations for pharmacological and psychological treatments for PTSD in adults. A comprehensive systematic review of studies published between 1980 and 2012 was

conducted to establish these recommendations. It's important to note that this review did not include complementary or alternative treatments. Additionally, updated research was conducted to identify studies published between 2012 and 2016 and assess if the recommendations still held based on more recent evidence.

The guideline's recommendations are based on the strength of evidence, treatment outcomes, the balance of benefits vs. harms and burdens of interventions, patient values and preferences, and the applicability of the evidence to different treatment populations. The the committee selected critical outcomes for making recommendations as PTSD symptom reduction and severe harm.

Based on the above, the panel strongly recommends the use of the following psychotherapies/interventions for adult patients with PTSD: cognitive behavioral therapy (CBT), cognitive processing therapy (CPT), cognitive therapy (CT), and prolonged exposure therapy (PE). After the panel's review, the recommendations for EMDR and Net have been changed from conditional to solid recommendations.

Furthermore, the panel has determined that the most important outcomes to consider are symptom reduction and severe harm. Other factors like remission, loss of PTSD diagnosis, quality of life, disability or functional impairment, prevention or reduction of comorbid medical or psychiatric conditions, adverse events leading to treatment discontinuation, and other adverse events and burdens are essential but not as critical.

Similarly, the panel considered the perspectives of patients on the essential qualities of a psychotherapist, emphasizing the significance of the therapist's trauma awareness and knowledge, provision of treatment information, imparting coping skills, utilization of a personalized approach, and cultural and socio-demographic sensitivity.

Effectively implementing interventions necessitates consideration of several pertinent factors, including obtaining informed consent and understanding the influence of patient and relationship factors on treatment. Informed consent involves providing patients with information about available treatments before commencing treatment to facilitate decision-- making. Furthermore, existing literature demonstrates a correlation between patient and patient-therapist factors (commonly referred to as "common factors"), relational factors, and treatment outcomes. These encompass patient coping style, expectations for change, and therapist empathy and collaboration. Clinicians are encouraged to consider these factors when

implementing recommended treatments.

Following the release of the APA guidelines, multiple organizations opted to collaborate on developing revised guidelines. Their collective aim was to enhance the scope of information provided, as it was widely perceived that the original APA guideline was overly restrictive, primarily focusing on studies involving randomized controlled trials (RCTs).

In the present day, a range of guidelines exists to aid clinicians in effectively treating post traumatic stress disorder (PTSD). Notable guidelines include those established by the American Psychiatric Association (APA), the International Society for Traumatic Stress Studies (ISTSS), the National Institute for Health and Care Excellence (NICE), the U.S. Department of Veterans Affairs and Department of Defense (VA/DoD), and the Phoenix Australia Centre for Posttraumatic Mental Health, among others.

Unlike the APA guideline that focuses on simple PTSD treatment, the ISTSS Expert Consensus treatment recommendations are focused on addressing complex PTSD in adults and propose a three-phase approach.

Phase 1 entails providing psychoeducation on the impact of trauma on an individual's development, life, relationships, and symptoms. Interventions in this initial phase should be evidence-based, tailored to individual patient needs, and emphasize emotion regulation skills, stress management, social and relational skills building, and cognitive restructuring. The therapeutic relationship is paramount in Phase 1 for fostering the development of emotional and social skills through providing support, validation, encouragement, and the demonstration of a healthy relationship.

Phase 2 centers on reviewing and reassessing trauma memories. This process involves revisiting or re-experiencing the traumatic events within a safe environment. The therapeutic benefit arises from the patient's ability to engage with distressing memories while maintaining emotional and psychological stability. Sessions dedicated to processing trauma memories should incorporate interventions aimed at strengthening emotion management, self-efficacy, and relationship skills.

Phase 3 marks the transition out of therapy and into community engagement. Therapists offer support and guidance for individuals to apply skills in building safe and supportive social networks and enhancing relationships. Phase 3 also includes planning for education, employment, recreation, and social activities, along with "booster" sessions designed to

refresh skills or address life challenges, relapse prevention interventions, and the identification of alternative mental health resources (Cloitre et al., 2012, p. 8-10).

Despite differences in treatment orientation in various guidelines, there exists a consensus on some recommended treatments. Key among these are solid recommendations for cognitive therapies such as Cognitive Behavioral Therapy (CBT) and Cognitive Processing Therapy (CPT). Additionally, most guidelines endorse narrative exposure therapy and Eye Movement Desensitization and Reprocessing (EDMR).

However, the consensus on efficacious interventions in a research-based environment may not uniformly apply to community and clinical settings. Community-based clinicians frequently encounter clients with complex comorbid conditions and severe, multifaceted symptoms, diverging from the simplified presentations seen in research studies. These clients often do not meet full PTSD criteria and grapple with a spectrum of trauma-based issues, including subthreshold PTSD and complex PTSD.

Therefore, clinicians must possess not only knowledge about trauma but also a range of competencies essential for delivering trauma-informed interventions. Among these, scientific knowledge about trauma demands the ability to discern, respect, and critically evaluate current foundational scientific trauma-specific knowledge and ethically apply it in clinical scenarios. (Cook et al., 2014, p. 303). Furthermore, trauma-focused psychosocial intervention necessitates clinicians to be well-versed in research-supported trauma interventions, including specific evidence on pharmacological treatment and mechanisms of change. Additionally, competence in working with clients in a strengths-based and nonpunitive manner that fosters trust, openness, and a sense of safety while eschewing avoidance and promoting collaboration with systems, social groups, and families, is indispensable.

The principles of Trauma-Informed Professionalism encompass the ethical application of values, skills, and attitudes to support trauma survivors within conventional therapeutic settings and organizational frameworks. This approach highlights the practitioners' capacity to optimize positive outcomes, minimize harm, and uphold appropriate professional boundaries. Incorporating cross-cutting trauma-focused competencies entails integrating a comprehensive set of knowledge, skills, and attitudes into all facets of trauma practice. Proficient clinicians possessing these competencies demonstrate an understanding of cultural contexts, individual

disparities, and developmental factors when engaging in trauma-focused research and practice. They establish collaborative decision-making with clients and aid in enhancing client safety and fostering a secure therapeutic rapport.

Cultural and diversity competence acknowledges that individuals harbor multiple intersecting social identities based on factors such as gender, race, ethnicity, sexual orientation, and socioeconomic status, among others. Practicing cultural humility involves actively learning from the patient or alternative sources and engaging in ongoing self-reflection to exhibit respect and appreciation for diversities while providing treatment. (Henning & Brand, 2019) Lastly, patient-related factors influencing the outcome of psychotherapy encompass reactance level, stages of change, preferences, coping style, culture, personal characteristics, and religion/spirituality. Additionally, relationship variables impacting treatment outcomes consist of therapeutic alliance, empathy, and the acquisition and application of patient feedback. Practitioners must recognize the potential influence of trauma and adopt a trauma-informed approach when engaging with patients. There is a growing clinical consensus emphasizing the necessity for specialized expertise and skills in addressing trauma and its psychological implications when treating individuals who have experienced trauma.

Many robust empirical studies indicate the interrelation between the therapeutic alliance and psychotherapy outcome when one transcends the diagnosis-specific focus of the APA guideline. Crafting treatment guidelines without considering the therapeutic relationship and responsiveness is profoundly inadequate and can be misguided.

Thus, considering the aforementioned competencies, research evidence, clinical expertise, patient preferences and cultural nuances, it is imperative to formulate unique psychological guidelines that underscore the significance of the therapy relationship, treatment adaptations, and individual therapist effects. These factors wield an independent influence on the patient improvement, overshadowing the influence of the particular treatment method.

2.3 American Psychology Association Multicultural Guidelines An Ecological Approach to Context, Identity, and Intersectionality

As previously mentioned, it is essential to possess more than basic competencies when addressing the treatment of individuals who have undergone traumatic experiences, particularly when the individual comes from a background divergent from that of the

psychologist. This scenario is frequently encountered in the context of refugee populations. The need for additional considerations arises from the significant influence of cultural, historical, age-related, and racial factors. In response to this, the American Psychology Association (APA) has formulated multicultural guidelines rooted in Bronfenbrenner's Ecological model, delineated into five distinct levels.

The Multicultural Guidelines represent an approach that urges psychologists to consider the impact of identity knowledge and understanding within professional psychological practice.

These guidelines encompass a wide range of group identities (e.g., Black/African American/Black American, White/White American, Asian/Asian American/Pacific Islander) to recognize intragroup variances and the significance of self-definition in identity. The objective of the Multicultural Guidelines is to furnish psychologists with a structured framework for contemplating dynamic parameters for delivering culturally competent services, encompassing practice, research, consultation, and education. All these endeavors benefit from an understanding of, appreciation for, and openness to learning about the multicultural backgrounds of individuals, families, couples, groups, research participants, organizations, and communities.

It is imperative to recognize that, within the scope of the Multicultural Guidelines, cultural competence does not suggest a finite process upon which the psychologist attains competence. Instead, cultural competence encompasses the concept of cultural humility, whereby it is viewed as an enduring journey of self-reflection and dedication (Hook & Watkins, 2015; Waters & Asbill, 2013).

Furthermore, the Multicultural Guidelines acknowledge Bronfenbrenner's ecological model (1977, 1979 as cited by American Psychological Association, 2017).), which delineates five concentric circles:

1. The microsystem, comprising immediate family, friends, teachers, and institutions that exert direct influence on the individual.

2. The mesosystem, denoting the interrelations of various social entities within the microsystem that impacts the individual's life, encompassing settings like home, school, and community.

3. The exosystem addresses societal and cultural forces that influence upon individuals without establishing direct associations with their personal experiences.

4. The macrosystem, aligning with the cultural context in which individuals are situated, encompasses cultural values, norms, legal systems, and governmental influences.

5. The chronosystem encompasses the impact of time's passage, historical trends, transitions, and the historical context enveloping individual experiences.

When looking specifically at the ecological model as outlined in the multicultural guidelines, delineates levels as follows: 1. Bidirectional Model of Self-Definition and Relationships 2. Community, School, and Family Context 3. Institutional Impact on Engagement 4. Domestic and International Climate 5. Outcomes It is important to note that these influences are reciprocal: the outer layers can impact the inner layers, and conversely, the inner layers can also influence the outer layers.
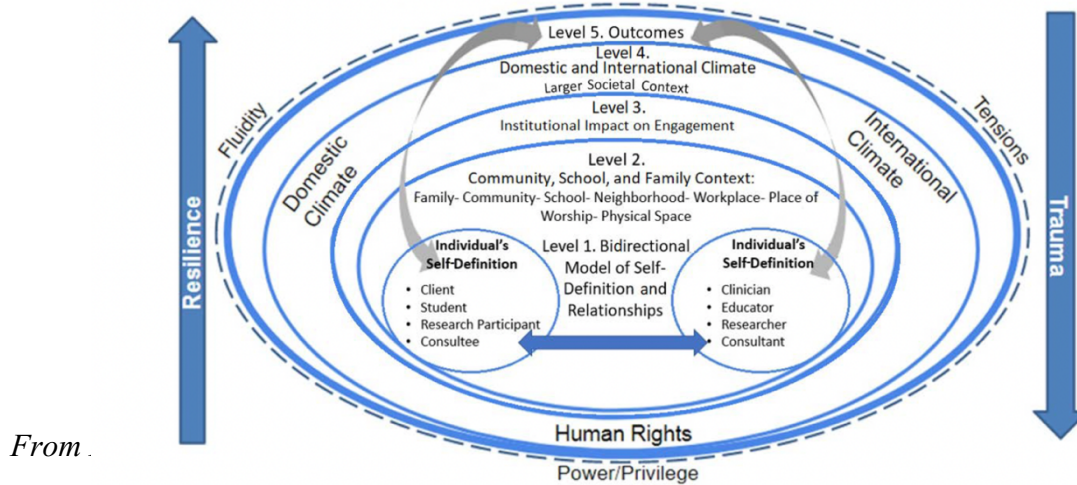
From ̲
Intersectionality.
(97), by American Psychology Association, 2017.

Considering these hierarchical levels, the model introduces two guidelines for each level, culminating in a collective total of ten guidelines. These guidelines are tailored to address the introductory section, practical applications, research and consultation, and supplementary appendices featuring practical case studies.

Level 1: Bidirectional Model of Self-Definition and Relationships

The two inner circles depict a bidirectional model of self-definition and relationships. The bidirectional arrow that intersects the two circles signifies the bidirectional relationships inherent within the model.

Identity is intricate, dynamic, and intersectional, and individuals' perceptions and delineation of their identities may not align with assumptions or categorical thinking that transpire during interactions with others. Concurrently, external messages significantly influence their self-definition and life outcomes, thereby either fostering or constraining psychological and social well-being.

"Guideline 1. Psychologists seek to recognize and understand that identity and self-definition are fluid and complex and that the interaction between the two is dynamic. To this end, psychologists appreciate that intersectionality is shaped by the multiplicity of the individual's social contexts" (American Psychological Association, 2017, p. 16).

Furthermore, psychologists are prompted to contemplate the interconnection between an individual's ecological contexts and identity development layers and the ramifications of such relationship on encounters with privilege and oppression, overall well-being, access to resources, and barriers to suitable, high-quality care. Additionally, psychologists are dedicated to identifying critical aspects of identity. Ethnic gloss describes the illusion of homogeneity among diverse groups that minimizes important distinctions within a broader racial category. Psychologists aim to understand the importance of becoming familiar with different aspects of identity and identify which aspects are particularly relevant to the issue.

Generational disparities may also mirror evolving societal attitudes toward sexual orientation, gender identities, religious and spiritual convictions, and social justice movements such as those advocating for women's, gay, and civil rights. Furthermore, they may encompass changing perceptions of family structures, advancements in reproductive technologies, and legislative developments on marriage equality (APA, 2012b; Drescher, 2009 as cited by American Psychological Association, 2017).

Psychologists endeavor to comprehend how an individual's identity is shaped by systemic influences and how power dynamics, privilege, and oppression influence biases, social norms, values, and negative perceptions of marginalized groups. However, a linear approach may fail to consider the impacts of patriarchy, cisgenderism, and heteronormativity

fully (where heterosexuality is seen as the norm, and relationships are only considered acceptable between people of different sexes), class oppression, ableism, and other forms of institutionalized oppression (Shin, 2015).

"Guideline 2. Psychologists aspire to recognize and understand that, as cultural beings, they hold attitudes and beliefs that can influence their perceptions of and interactions with others as well as their clinical and empirical conceptualizations. As such, psychologists strive to move beyond conceptualizations rooted in categorical assumptions, biases, and/or formulations based on limited knowledge about individuals and communities" (American Psychological Association, 2017, p. 26).

Psychologists base their perspectives on their professional expertise, personal life experiences, and interactions across diverse environments, all shaping their empirical and clinical conceptualizations. Embracing a color-blind racial ideology can lead to a disconnect from the emotional aspects of discussions about sociocultural issues, thus negatively impacting clients (Neville, Awad, Brooks, Flores, & Bluenel, 2013 as cited by American Psychological Association, 2017).

Overlooking or minimizing sociocultural differences and similarities can significantly impact a psychologist's comprehension of the client's experience and the dynamics between the therapist and client, as these dynamics are often influenced by both parties' sociocultural backgrounds and experiences (Altman, 2010; Burkard, Knox, Clarke, Phelps, & Inman, 2014; Miville et al., 1999; Owen et al., 2016; Tummala-Narra, 2016 as cited by American Psychological Association, 2017).

A therapist's awareness of their client's cultural norms, beliefs, and values, as well as recognition of sociopolitical influences such as racism, xenophobia, anti-Muslim prejudice and discrimination, anti-Semitism, sexism, transphobia, cisgenderism, homophobia, heterosexism, classism, and ableism, all of which affect the therapeutic relationship, is considered essential for culturally competent practice (Atkinson & Hackett, 1995; Maxie et al., 2006 as cited by American Psychological Association, 2017).

Psychologists are encouraged to utilize their expertise to assess the suitability and relevance of models and theories to the individuals, communities, and organizations they engage with.

In his work, Cole (2009) has put forward three specific questions that psychologists may consider when evaluating the applicability of a particular theoretical model or approach to

their work within diverse communities and during research. Cole's questions are as follows:

1. Who is included in this category under investigation?

2. What role does inequality play?

3. Where do the similarities lie across and within the social categories under consideration?

Psychologists endeavor to engage in thorough and continuous examination and reflection on their own cultural perspectives, experiences, and theoretical frameworks, and their influence on practice, research, consultation, and education.

Level 2: Community/School/Family Context

At this level, the psychologist aims to understand the client's experience from a multicultural perspective that takes into account the influence of community, school, workplace, social factors, and family situations. Two main issues to be addressed at this level include: (1) the impact of language in community, school, workplace, and family settings; and (2) the effect of social and physical environments in the clients' lives.

"Guideline 3. Psychologists strive to recognize and understand the role of language and communication through engagement that is sensitive to the lived experience of the individual, couple, family, group, community, and/or organizations with whom they interact. Psychologists also seek to understand how they bring their own language and communication to these interactions" (American Psychological Association, 2017, p. 34).

As part of their professional practice, psychologists are encouraged to consider carefully the significance of language in their interactions with clients, taking into account the various contexts in which the client operates, such as school, work, family, and community settings. Language, in this context, encompasses both verbal and nonverbal symbols utilized for interpersonal communication (Guo et al., 2009; Javier, 2007), and is imbued with the cultural and moral principles of its speakers (Chen, 2015, as cited by American Psychological Association, 2017).

Psychologists are advised to discern the cognitive and affective dimensions of bilingualism and multilingualism and the psychological implications associated with various languages and their connection to cultural values and identity (Akhtar, 2011). Furthermore, it is essential to recognize that linguistic terminology and meanings are subject to evolution influenced by sociopolitical shifts, such as the increasing use of technology, primarily social media as a global communication medium.

"Guideline 4. Psychologists endeavor to be aware of the role of the social and physical environment in the lives of clients, students, research participants, and/or consultees". (American Psychological Association, 2017, p. 40).

The psychologist acknowledges the significant influence of resources within the immediate environment in shaping individuals' capacity to construct their lives. These resources, collectively called social capital, encompass factors such as the neighborhood's overall affluence and safety, the caliber of educational institutions, environmental risks, healthcare and transportation accessibility, and the availability of wholesome sustenance. A wealth of resources within an environment can optimize the potential for a high standard of living, whereas a scarcity of resources may erect barriers to self-fulfillment. Consequently, the psychologist may seek to direct attention towards evaluating the resources accessible to clients, including any impediments to healthcare services, the quality of such services, and other social and physical environmental factors that may either obstruct or facilitate interventions.

Level 3: Institutional Impact on Engagement

This level considers how the influences described in Levels 1-2 interact within a larger institutional and systemic context. It is essential to consider the nature of engagement at the institutional level.

While psychologists may focus on the individual nature of problems presented at Level 1, within the multicultural framework presented, three additional areas need to be considered:

1. How power, oppression, and privilege affect institutional influence and engagement.

2. The ongoing impact of inequities and disparities.

3. The role of advocacy in institutional engagement.

"Guideline 5. Psychologists aspire to recognize and understand historical and contemporary experiences with power, privilege, and oppression. As such, they seek to address institutional barriers and related inequities, disproportionalities, and disparities of law enforcement, administration of criminal justice, educational, mental health, and other systems as they seek to promote justice, human rights, and access to quality and equitable mental and behavioral health services" (American Psychological Association, 2017, p. 45).

In order to enhance their practice, psychologists should broaden their focus beyond individual well-being to consider the impact of structural oppression inherent in institutional practices,

which perpetuate inequities and disproportionality, leading to adverse psychosocial outcomes for marginalized individuals, couples, families, and communities. Psychologists are encouraged to engage in continuous self-reflection concerning their social positioning as well as to recognize and take ownership of their privilege, particularly when interacting with clients who may occupy less privileged positions.

"Guideline 6. Psychologists seek to promote culturally adaptive interventions and advocacy within and across systems, including prevention, early intervention, and recovery". (American Psychological Association, 2017, p. 60).

Psychologists recognize the significance of culture in the context of mental health treatment, intervention, prevention, and service delivery (Bernal & Sáez, 2006; Torres, Malcolm, & DesRosiers, 1996). Understanding the multicultural aspects of personal and organizational experiences is paramount. "Culture-centered interventions" (APA, 2003; Pederson, 1997 as cited by American Psychological Association, 2017) refer

to intervention efforts that prioritize the integration of culture and language in the service provision. These interventions demonstrate an awareness of culture, knowledge of cultural aspects of individuals, groups, couples, families, communities, or organizational experiences, an understanding of the distinction between culture and pathology, and an ability to integrate these points within the context of service delivery (Zayas, Torres, Malcolm, & DesRosiers, 1996 as cited by American Psychological Association, 2017).

Psychologists are encouraged to advocate for systemic change in mental health. Systemic mental health advocacy is a social movement aimed at reforming the inequitable policies and practices of legal, government, and health systems to foster a more inclusive community for people with mental disorders (also known as collective mental health advocacy; Stringfellow & Muscari, 2003) (Gee, McGarty, & Banfield, 2015, p. 1 as cited by American Psychological Association, 2017).

D. Level 4: Domestic and International Climate

At the model's fourth level, the influences of Levels 1 to 3 converge to contemplate the influence of domestic and international climates on client experiences.
Two specific areas warrant attention: (1) the psychology profession's assumptions regarding work within an international context and (2) the role of the developmental stage within

historical time. These areas are addressed in Guidelines 7 and 8.

"Guideline 7. Psychologists endeavor to examine the profession's assumptions and practices within an international context, whether domestically or internationally based, and consider how this globalization has an impact on the psychologist's self-definition, purpose, role, and function". (American Psychological Association, 2017, p. 65).

The recognition of international psychology as a postmodern form of consciousness enables psychologists to develop theories regarding universal conditions of trauma, resilience, oppression, empowerment, and human rights and dignity while also understanding and addressing culture-specific manifestations of these universal experiences.

Psychologists are advised to be mindful of their cultural perspectives and to avoid imposing them, as doing so may have a detrimental effect on the well-being of clients from diverse nationalities. Failing to demonstrate openness and accommodation may impede psychologists' comprehension of the varied experiences of the individuals they engage with professionally. Also, psychologists must recognize that, for immigrants, factors such as home, community and identity are situated within a complex interplay of inherited histories, current choices, and access to employment, community affiliations, neighborhoods, nonfamilial friendships, and language acquisition.

"Guideline 8. Psychologists seek awareness and understanding of how developmental stages and life transitions intersect with the larger biosociocultural context, how identity evolves as a function of such intersections, and how this different socialization and maturation experiences influence worldview and identity". (American Psychological Association, 2017, p. 76).

The life cycle of individuals is profoundly affected not only by their immediate social and physical environment but also by prevailing societal trends and historical circumstances such as migration, wars, and economic downturns. Moreover, the historical epoch can influence an individual's self-perception. Psychologists endeavor to comprehend how these dynamic forces have shaped a client's personal experiences and development. They also strive to cultivate an understanding of how an individual's identity has evolved and how their identities and respective significances are influenced by the historical period, as well as the concurrent developmental, social, and familial contexts in which the individual is situated.

E. Level 5: Outcomes

At Level 5 of the model, the combined influences of all levels converge in the form of outcomes. Outcomes pertain to the positive and negative consequences of activities undertaken by clients and psychologists and are shaped by forces in Levels 2–4. "Guideline 9. Psychologists strive to conduct culturally appropriate and informed research, teaching, supervision, consultation, assessment, interpretation, diagnosis, dissemination, and evaluation of efficacy as they address the first four levels of the *Layered Ecological Model of the Multicultural Guidelines"*. (American Psychological Association, 2017, p. 83).

Psychologists are mindful of the fact that individuals from diverse groups have been observed to display a reduced inclination towards seeking assistance from mental health professionals and engaging in research and interventions. Additionally, they demonstrate a decreased likelihood of persisting with therapy or research participation once initially enrolled.

"Guideline 10. Psychologists actively strive to take a strength-based approach when working with individuals, families, groups, communities, and organizations that seeks to build resilience and decrease trauma within the sociocultural context". (American Psychological Association, 2017, p. 88).

A strength-based approach considers and incorporates the positive attributes that diverse individuals, families, groups, and organizations bring to their experiences. In a strength-based approach, the psychologist employs a perspective that acknowledges the challenges faced by diverse individuals, families, groups, communities, and organizations while also identifying the positive ways in which they address life experiences.

Resilience is an integral aspect of the strength-based approach. While it is crucial for psychologists to acknowledge the influence of individual factors on resilience, they must also consider the role of contextual factors and their interplay with individual factors in resilience. Resilience is also enhanced by external resources, sociocultural factors, and affirming systems.

Conversely, trauma is regarded as a "global phenomenon" that defines the human condition (Buse et al., 2013, p. 15). Although trauma is a universal phenomenon, psychologists are encouraged to consider the cultural context in which traumatic events occur (Wilson, 2007). An examination of the influence of culture on the interpretation and response to traumatic

events is a crucial aspect of cultural considerations of trauma.

A multicultural perspective on trauma necessitates an awareness of the influence of cultural perspectives on individual, couple, family, group, community, and organizational levels in the interpretation and experience of traumatic events. In a study conducted by Marques and colleagues (2016), it was determined that professionals must recognize the influence of various factors, including family structure, religious beliefs, exposure to violence, and socioeconomic status on client beliefs and emotional responses to trauma.

2.4 Dreams, hopes, and expectations during migration

As the multicultural guidelines postulate in their last level (outcomes), it is essential to analyze the impact of an individual's experiences. When addressing the migration experiences of refugees, research often focuses on examining the mental health implications and trauma, which are frequently prevalent in this demographic due to their compelled migration and resettlement in a new country. Nonetheless, it is equally imperative to consider these individuals' resilience, aspirations, and expectations, which motivated their decision to migrate and their anticipations upon entering a new country.

Although the research on this topic is not as extensive as that on the trauma and mental health repercussions in refugee populations, several articles have investigated the factors that play an essential role in the moment of migration, as well as the aspirations and expectations that lie behind people's decision to make this drastic change in their lives. As well as, recognizing the profound value of crafting narratives and affording individuals the opportunity to articulate their personal stories are essential.

In his 1990 work, Bruner (p. 109) postulates that the act of narrating one's life possesses the potential to influence the past and shape the present retrospectively or to reinterpret the past through the lens of the present. Attentively engaging with the narratives of refugees concerning their heritage and considering the implications of this heritage for their future and their social and familial support systems to meet these demands holds promise for bringing the majority of society and the education system closer to addressing their needs.

This approach can aid in surmounting barriers and charting new courses underpinned by an ethos of possibility that expands their horizons of hope, imagination, and transformative, discerning citizenship, thus fostering the realization of their ambitions. Additionally, in the

face of adversity, such as separation from family and friends, displacement from home and community, and loss of one's country, narratives can aid refugees in reconstructing their identities. This process allows them to acknowledge their losses, adapt to new environments, and establish connections between their original and host cultures (Puvimanasinghe et al., 2014, p. 70).

Furthermore, the presence of hope and expectations for the future may inspire action (Cole and Durham, 2008; Sarro, 2015 as cited by Kleist et al., 2016), help people cope with suffering and difficult life situations (Zigon, 2009), or lead to resignation and passivity (Crapanzano, 2003 as cited by Kleist et al., 2016).

The understanding of hope in this context is broad, encompassing an anticipation of what is yet to come, characterized by simultaneous potentiality and uncertainty. As suggested by Lubkemann, hope can be seen as the sustenance of the possibility of a desired alternative to current reality. It is integral to social imaginaries, which enable the practices of a society. Thus, refugees' aspirations for migration reflect how individuals distribute hope unevenly across different settings. Hopelessness regarding imagined futures at home often contrasts with the hope that migration will expand one's range of potential futures (Mains, 2012). The difference in migrants' attitudes toward uncertainty upon emigration and return lies in hope's ability to mediate uncertainty: uncertainty linked to migratory transitions may be approached with positive anticipation and a proactive disposition or may elicit apprehension, contingent on whether the transition inspires hope. Both uncertainty and hope are inherently temporal, connecting an individual or group's present with the future (Anderson, 2006; Bloch, 1986; von Benda-Beckmann and von Benda-Beckmann, 1994 as cited by Kleist et al., 2016).

The interplay between hope and uncertainty influences migrants' willingness to take chances, defined as engaging with uncertainty with a sense of positive anticipation. Additionally, personal circumstances, contextual factors, and interpersonal dynamics shape the interplay between hope and uncertainty in migration trajectories. Macroeconomic, political, and social conditions in various geographic locations may evoke hope for the potential of socioeconomic progress or instill a sense of unavoidable stagnation. Hope and the availability of perceived alternatives influence one's perception of affordances regarding taking chances.

Thus, the concept of hope can be understood in two ways: it may be viewed as an individual's ability to navigate challenges and as a response to uncertainty, particularly in contexts of

forced displacement. Even the more optimistic aspect of hope, or hopefulness, represents a nuanced state of being. Hope is not a passive endeavor involving waiting for a better future; instead, it represents an active approach that allows individuals to expand their horizons and take initiative in the world.

2.5 Socio-constructionist and intercultural approach

The social constructionist approach, as articulated by Kenneth Gergen (2009), emphasizes that knowledge, meaning, and reality are not inherent or objective but are constructed through social processes and interactions. In this perspective, human understanding is shaped by language, culture, and shared practices within specific contexts rather than existing as an independent, universal truth. Gergen's approach challenges traditional assumptions of a fixed reality, proposing instead that what we understand as "reality" is co-created by individuals as they engage in dialogue and interact with one another.

One fundamental principle of social constructionism is the rejection of the idea that human behavior and experience are solely determined by internal, individual factors (such as personality traits or biological predispositions). Instead, Gergen argues that individuals' identities, actions, and worldviews are shaped through their interactions with others and the broader social structures in which they are embedded. This includes the influence of societal norms, historical contexts, cultural values, and institutional power dynamics. For example, concepts such as gender, race, and mental health are not seen as purely biological or psychological facts but as socially constructed categories that are given meaning through discourse and social practice.

Gergen (2009) highlights the central role of language in constructing reality. Language is not simply a neutral medium for describing an objective world; instead, it is an active force in shaping how we understand and experience that world. Individuals negotiate and construct meanings through language, often relying on shared conventions or cultural symbols. This way, knowledge is a product of collective agreement rather than individual discovery. Gergen's perspective suggests that what we consider "truth" is contingent upon specific social, historical, and cultural contexts and may vary across different communities or periods.

The social constructionist approach also emphasizes the relational aspects of meaning-making. According to Gergen, humans are fundamentally social creatures, and our identities and understandings are formed in relational contexts. In this sense, knowledge is created through the continuous interaction between people, groups, and institutions, which constantly shape and reshape meanings. This process is dynamic, with constructions of reality changing as societal conditions evolve or as different voices and perspectives emerge.

In conclusion, Gergen's (2009) social constructionist approach offers a valuable framework for understanding the socially constructed nature of knowledge, meaning, and identity. By emphasizing the role of language, social interaction, and cultural context, it challenges traditional notions of objectivity and highlights the fluid, dynamic, and relational nature of human understanding. Therefore, this approach was particularly relevant in the research, as it focused on exploring the narratives of individuals and their co-construction of them. As well as how they create and negotiate meaning in specific social contexts such as migration and refugee status.

On the other hand, the intercultural approach intercultural approaches have gained increasing importance in our globalized world, where diverse cultures interact more frequently than ever. One of the central ideas in these approaches is the recognition that understanding and engaging with different cultures is crucial for meaningful communication, conflict reduction, and fostering social cohesion. As Bennett (1993) described, this approach moves beyond mere tolerance of diversity to actively fostering empathy, mutual respect, and intercultural sensitivity. Bennett's (1993) Developmental Model of Intercultural Sensitivity (DMIS) outlines the stages individuals pass through as they develop their capacity to understand and interact effectively with diverse cultures. This model highlights the gradual evolution from an ethnocentric view (denial) towards an ethnorelative (integration) one, where cultures are seen as relative and not as superior or inferior to one another.

Another significant perspective on intercultural approaches comes from the concept of *dialogism,* as proposed by Bakhtin (1981). Bakhtin's ideas emphasize the role of dialogue in shaping culture. He argued that cultures are not static entities but are formed and transformed through continuous interactions and conversations. His theory of the *dialogic imagination* suggests that each culture exists in a state of continuous exchange with others, evolving and reshaping itself in response to those interactions. This notion of dynamic and

relational culture aligns with the broader view of intercultural competence, which goes beyond superficial awareness of cultural norms to deeper engagement and shared learning.

Building on these foundations, Byram (1997) introduced the concept of *intercultural communicative competence*, which is crucial in navigating intercultural encounters. According to Byram (1997), intercultural competence is not just about understanding different cultural practices but also involves reflecting on one's cultural position and engaging empathetically with others. This approach underscores the need for individuals to be aware of other cultural norms and values and be critically conscious of their own cultural assumptions. Such awareness fosters more meaningful and reciprocal exchanges between individuals and groups from diverse backgrounds.

In line with these theories, the United Nations Educational, Scientific and Cultural Organization (UNESCO) has advocated for an intercultural approach that promotes empathy, dialogue, and active engagement with different cultures. This global perspective emphasizes that respecting cultural diversity should go hand-in-hand with promoting shared human rights and dignity values. UNESCO's guidelines aim to nurture an intercultural mindset that recognizes and values differences while also seeking common ground to build more cohesive and inclusive societies (UNESCO, 2013).

Considering this, using intercultural approaches in qualitative research that analyze participants' narratives from diverse nationalities is crucial because these approaches emphasize understanding and valuing cultural differences, fostering empathy, and promoting effective communication. By applying these frameworks, researchers can move beyond surface-level observations and explore how distinct cultural backgrounds, values, and social norms shape the experiences of refugees from both regions. This perspective helps avoid stereotyping, acknowledges culture's fluid and dynamic nature, and facilitates more nuanced interpretations of how each group navigates challenges, expresses needs, and engages with host societies, leading to deeper insights and more inclusive findings.

Chapter 3: Research

3.1 Introduction and Research Questions

The thesis is rooted in the narratives of Venezuelan women seeking refuge in Mexico and Nigerian women seeking refuge in Italy. The research embraces a socio-constructionist perspective, as articulated by Gergen (2009), and adopts an intercultural lens, drawing from the works of Chiara & Romaioli (2021) as well as Chiara et al. (2023).

In the preceding chapter, it was noted that much of the literature on mental health tends to emphasize symptoms and diagnosis, overlooking the significance of studying the mental well-being of individuals affected by circumstances such as forced displacement and human trafficking. It is widely recognized that psychotherapy plays a pivotal role in fostering social integration and improving mental health. Nevertheless, its application in the aforementioned settings remains limited due to inadequate resources allocated to this endeavor.

Nonetheless, numerous theoretical traditions in the literature have given rise to a variety of approaches to trauma. Within these studies, personal narratives are frequently cited as pertinent to the therapeutic processes of individuals who have undergone traumatic events.

Thus, the repercussions of trauma have been studied in relation to their potential benefits and the development of personal growth. Some scholars posit that traumatic events can offer an opportunity for posttraumatic growth (Tedeschi & Calhoun, 1995, 1996, 2004, as cited by Chiara et al., 2021). The term posttraumatic growth (PTG) has been employed to denote a "positive psychological change experienced as a result of the struggle with highly challenging life circumstances" (Tedeschi & Calhoun, 2004, p. 1, as cited by Chiara et al., 2021).).

Amid this research, Chiara & Romaioli (2021) propose a social construction and intercultural approach that allows understanding of the complexity of individuals as people inhabited by multiple selves and voices. Through an appreciation of the diverse narratives of individuals, we can gain insight and recognition of their experiences from various standpoints within the social and relational realms in which they are situated. Considering this

perspective, we can discern, as proposed by Hermans (2001), that personal narratives are not singular but rather multifaceted and socially shaped through engagement with others.

According to Hermans (2001), a person's sense of self, or "I," can shift from one perspective to another as their situation and experiences change. This ability to move between different viewpoints means that when new dialogical narratives are introduced, it can help individuals manage their challenges more effectively. In the context of trafficking survivors, these new narratives can provide a way for them to reframe their experiences, focusing on their personal strengths and skills to better cope with their circumstances (Hermans, 2001, p. 248).

In light of this approach, the research endeavors to comprehend the narratives of both Nigerian and Venezuelan refugee women to address the following research questions:

1. What are the dominant migration narratives in the refugee groups participating in the research?
2. Are there differences or similarities in the themes that will be co-generated?
3. Is it possible to co-construct a narrative that enhances the resources of the participating refugees?

3.2 Methodology

The thesis project consists of qualitative research (Flick, 2009) through episodic interviews that were analyzed through a reflexive thematic analysis (Brown & Clark, 2006, 2019).

The four research steps proposed by (Blaikie and Priest, 2019 as cited by Flick, 2018). were conducted to design this type of research. Thus, first, the "focusing" was developed by establishing the purpose of the study, this being to explore and compare the narratives of refugee women in border countries such as Mexico and Italy, with the aim also to promote a narrative aimed at emphasizing the resources and skills and strengths that have enabled them to cope with difficulties, later the research questions that were to be answered were also developed.

The second step was the "framing" for which the epistemology research was conducted. The third step was "selecting," in which it was essential to establish where the

data would be taken from, how it would be analyzed, and how each step of the research would be carried out. Considering the aforementioned, it was decided that the data would be collected by contacting NGOs or associations that were in contact with refugees to conduct episodic interviews with the participants who had refugee status in Italy and Mexico. Later, the data would be analyzed through a reflexive thematic analysis of the transcriptions of the interviews. Lastly, for the "distilling" step, the timing for collecting and analyzing data was established.

Episodic interview

As mentioned before, the interview that was decided for this research is the episodic interview. This type of interview, as explained by Flick (2018), utilizes questions in a narrative format to recall a person's episodic knowledge. It also combines two approaches: question/answer and narrative stimuli/narratives in one method. Therefore, it's understood that the episodic interview triangulates two approaches in one method.

To better understand this type of interview, it is essential to understand an episode as a situation, incident, period, or occurrence relevant to understanding the meaning an issue has for the interviewee. Episodes can be seen in different areas, such as working life and everyday life.

Thus, the episodic interview is oriented on small-scale and situation-based narratives when collecting data. Small-scale narratives are short narratives linked to a specific situation, whether past, current, or future, linked to life history narratives.

The main objective of this interview is to ask interviewees to remember a specific situation and recount it. After this, through the interviewee's personal history, there are several questions asking for meaningful experiences regarding the issue to be studied. In this case, the research was focused on the participants' narratives regarding their refugee status and migration journey. At the end of each interview, as proposed by Flick, there was room for the participants to ask questions or add any comments they thought were missing or essential to consider.

In order to prepare, develop, and design the episodic interview for this research, the Six Fs proposed by Flick were taken into account. These being the following; "framing" which aims to prepare the interview and the introduction to make it clear for the interviewee

and make room for a small-talk, critique, or any additional aspect; "formulating" in which questions for subjective definitions of the relevant concepts, and covering relevant personal history of the issue studied were prepared; "foregrounding" in which it was necessary to cover essential areas in everyday life of the participant; "focusing" to make sure the interviews questions were able to provide in-depth and detail information regarding the subject that was discussed; "foreseeing" to make sure that the questions avoided generalization in the replies and ensuring that there were good instruments to record the interview and have a detailed transcription; lastly "finding and formulating" in which the coding method, analyzing and interpreting the episodic interview was chosen. As mentioned earlier, a reflexive thematic analysis was used for this research.

The questions used for the episodic interviews were as follows:

1. Can you tell me about your migration experience?
2. What were the principal difficulties in your journey?
3. How were you able to overcome the principal difficulties of your journey?
4. After going through this migration journey, what will you say are your best resources and skills?
5. When you think back to your first months in (Mexico/Italy), can you tell me about an experience where you used these skills?
6. Currently, how is your experience in (Mexico/Italy)?
7. How is life now?
8. Tell me about the dreams, skills, and resources that helped you in your migration journey.
9. If you could tell me the story about what you wish your future would be like, what would it be like?
10. Is there anything you would like to add, anything you would like to have been asked, or any feedback or comments you have about the research?

Research context

The selection of women from Venezuela and Nigeria for this study was primarily based on the feasibility of conducting interviews with these groups. As there was access to these communities, allowing for effective communication and data collection. Additionally, another critical reason for choosing these groups was the ability to conduct interviews in the

participants' native languages—Spanish for Venezuelan women and English for Nigerian women—ensuring clear communication and the collection of more accurate and authentic qualitative data. The inclusion of these two groups also enabled the study to incorporate perspectives from distinct regional and cultural backgrounds, which provided a comparative basis for understanding the experiences of displaced women from different contexts. The established accessibility to these populations ensured the reliability of gathering firsthand qualitative data.

Similarly, the decision to focus on Mexico and Italy as the host countries was informed by the existing familiarity with the social and cultural dynamics of both nations, as well as with the operations of key non-governmental organizations (NGOs) working in the field of refugee support. This familiarity facilitated the logistical aspects of the research, including access to NGOs and an understanding of the local contexts. Furthermore, both Mexico and Italy are ranked high on the UNHCR list of countries receiving significant numbers of refugees, making them suitable settings for exploring the integration and support dynamics in host countries with considerable refugee populations. This selection was guided by practical considerations and the alignment with UNHCR data.

As previously noted, the interviews were conducted with women who sought refugee status in Mexico and Italy. Accordingly, it is crucial to outline the procedures for applying for refugee status in each country, the respective response times, and to provide an overview of the types of assistance and support services each host nation offers.

Mexico

According to the United Nations High Commissioner for Refugees (2024), more than 53,000 people in Mexico applied for asylum in 2024 as of 6 September. In 2023, Mexico received a record number of 140,000 asylum claims, making it one of the countries with the highest number of asylum claims worldwide. The Mexican Commission for Refugee Assistance (COMAR) has quadrupled its processing capacity since 2018 with support from UNHCR. More than three-quarters of all asylum claims in the country are filed in the South of Mexico. (p.1)

When applying for refugee status in Mexico, it's important to note that the individual must visit the Mexican Commission for Refugee Assistance (COMAR) upon entering the

country. However, this commission only has offices in the cities of Tapachula, Palenque, Tuxtla Gutierrez, Tenosique, Acayucan, Mexico City, Guadalajara, Tijuana, Ciudad Juarez, Saltillo and Monterrey. If the person arrives in a different city, they should contact the National Institute of Migration (INM) for guidance on immigration regulations. After submitting the application, the person will receive a summons within one to two weeks to appear and complete the pre-registration form, providing biometric information. Following this, the first interview will be conducted. The purpose of the interview conducted by the National Institute of Migration (INM) in Mexico for individuals seeking refugee status is to assess their eligibility for protection based on international and national standards. During this interview, the INM gathers detailed information about the applicant's background, the circumstances that led them to flee their country, and the specific risks or threats they face if returned. The primary goal is to establish whether the individual qualifies as a refugee under the 1951 Refugee Convention or the Mexican Law on Refugees, Complementary Protection, and Political Asylum.

The interview allows the authorities to evaluate whether the applicant meets the criteria of having a well-founded fear of persecution based on race, religion, nationality, membership in a particular social group, or political opinion. It is also intended to assess if the applicant requires complementary protection due to risks of torture, inhumane treatment, or violence in their home country. The process involves exploring the applicant's narrative, verifying their claims' consistency, and determining their statements' credibility.

Ultimately, the interview is a critical step in the refugee status determination (RSD) process, enabling the INM to make informed decisions on whether to grant asylum or protection to those in need. Depending on the case, further interviews may be required, or the person will proceed directly to the eligibility interview, during which they must explain why they leave their country of origin and cannot return.

After the interview, the law states that cases should be resolved within 45 business days, which usually takes around six months. While waiting for the resolution, the person is given a humanitarian visitor's card, which allows them to stay legally in the country, access medical services, education, housing, and apply for a job. Subsequently, if the resolution is positive, the person will receive a certificate of refugee status. Otherwise, the person will

receive a certificate of rejection. However, they can request an appeal for review; if this is denied again, they can file a nullity lawsuit.

It's crucial to understand that, unlike in other parts of the world, if an individual is detained by immigration before filing a refugee status application with COMAR, they will have to wait in a detention center, which is essentially a jail. As a result, many people choose to return to their country of origin and opt not to wait for the resolution of their process, as the conditions in these centers are suboptimal.

According to the United Nations High Commissioner for Refugees (2016):

In 2015, more than 190,000 persons were detained for immigration-related purposes, including at least 818 asylum-seekers and over 35,700 children. Alternatives to detention (ATDs) are provided in the law but only in a very limited set of circumstances and are rarely used, in part due to practical and operational challenges; very few unaccompanied or separated children (UASC) – both migrants and asylum-seekers – benefit from alternative care arrangements". (p.67)

Likewise, unlike other countries, the Mexican government does not consider a person's experiences during their journey when granting refugee status. Refugee status is strictly linked to what happened in the country of origin, based on two fundamental questions:

Why did you leave your country of origin?

What would happen if you returned to your country of origin?

If considered eligible under the five grounds stipulated by international law in the 1951 Ginebra convention, which are race, religion, political opinion, social group, or nationality, the only reason a person may not be granted refugee status is if they fail the exclusion test, meaning that they present a risk to public safety or health.

On the other hand, if, in the Commission's opinion, the applicant does not meet the threshold for refugee status protection because he/she does not fall within the five previously mentioned grounds but still has reasons that prove that his/her life is at risk, he/she could receive complementary protection, which has the same rights as refugee status, except for family reunification.

Once a person receives refugee status, they are granted permanent residency, which, as the name implies, does not have to be renewed since it is permanent. With this residency,

the person can access more rights, such as obtaining their unique public registry number (CURP) and conducting procedures in the tax administration system (SAT). Additionally, this residency allows for a more significant local integration process, as the individual can seek employment, pay taxes, and contribute to the local community. After two years of having this residency, the person can apply for naturalization.

To help achieve integration in the country, the Mexican Commission for Refugee Assistance (COMAR) provides essential services to support needy individuals. These services are designed to address temporary needs from the onset of the refugee status recognition process until integration is achieved. The services offered encompass various areas:

- Migratory Procedures: This service primarily focuses on obtaining migratory documentation to validate a legal stay in Mexico. Additionally, it supports change of address notifications, document replacements, and other related matters.

 - Social Assistance: This service aims to facilitate access to subsistence, food, and temporary housing resources.

– Health: COMAR assists with managing access to care in public hospitals and facilitates affiliation to services provided by the State.

- Education: This service includes support for admission to public schools, validation of prior education, and technical training for employment purposes.

- Family Reunification: COMAR provides support for the internment in Mexico of a refugee's family members, subject to the verification of family ties, solvency, and economic dependence.

- Naturalization: Guidance and support are offered for the naturalization process before the Ministry of Foreign Affairs. (Comisión Mexicana de Ayuda para Refugiados, 2016)

Moreover, the Mexican government receives significant support from the UNHCR, in addition to COMAR and the National Migration Institute. The UNHCR provides technical assistance and capacity building and ensures that procedures and resolutions are carried out effectively. Additionally, UNHCR has a network of allies to assist refugees with transportation, psychological care, and finding employment within the country.

Although the Mexican Migratory Law ensures the right to healthcare, education, and jobs, accessing these services and opportunities can be difficult. Refugees are also responsible for acquiring housing, even though they often have few resources. Further, they must navigate these situations while at risk of violence from criminal organizations or predatory actors" (Leutert, 2020, p.41).

The previously described Mexican context presents distinct conditions and criteria for obtaining refugee status, influencing the experiences of the Venezuelan women interviewed in this study. In contrast, the Nigerian participants encountered different procedures within the Italian context. Therefore, it is necessary to provide an explanation of the refugee status application process in Italy, as it constitutes the framework in which the Nigerian women engaged during their pursuit of asylum.

Italy

According to government statistics, by mid-October, more than 52,000 people, including unaccompanied children, reached Italy by sea, 62% less than those in 2023.

The process of applying for refugee status in Italy depends on how the person entered the country. Here, we will outline the procedure for those who arrive in boats crossing Libya and arriving in Sicily, as this was the route of the people interviewed.

In this scenario, once individuals arrive on Italian territory, the government distributes them to different regions of the country. Upon reaching their new destination, the person must express their wish to apply for refugee status at the police headquarters of the city where they are. At that time, they must fill out the C3 document, which formalizes the application for refugee status. The person must answer two main questions:

1. Why did you leave your country?
2. Why can't you go back, or what would happen if you did?

Additionally, they must explain the reasons that led to their decision, the experiences they may have had during their migratory journey, their family situation in the country of origin, and the type of work they had in the country of origin.

After presenting at the office headquarters, usually after a month or two, the person is asked to go to the commission, where they will review the information provided in the C3

form. At this point, the person must confirm if the information is correct or if there are any errors. They also have the opportunity to change any of the information they provided previously, even if it's a significant change, like their name, age, or any description previously given. In many cases, the applicant may be asked to attend multiple interviews because some details are unclear or because not all commission members agree on the case resolution.

As is the case in Mexico, there are two possible outcomes:

1. The person is recognized and granted refugee status, valid for five years.

2. The person is not recognized as a refugee; in which case an expulsion order is issued. However, depending on the situation, the person may appeal their case, which will be sent to a court. In this situation, the process can take 3 to 4 years.

It is important to note that Italy maintains a list of countries deemed safe. Consequently, when receiving requests from these countries, standard procedures are followed to assess the legitimacy and formality of the request as outlined by the law. However, the likelihood of approval in such cases is minimal. In the event of an appeal, the individual stands a better chance when presenting their case in court, as the court takes into consideration not only their country of origin but also their migratory journey, experiences in Libya, and potential trafficking history, among other pertinent factors.

Additionally, in Italy, there are Extraordinary Reception Centers (CAS) that provide free accommodation, financial support, food vouchers, medical care, education, psychological support, help with job search documentation, and language learning tools to those seeking refugee status. Applicants have access to these services while waiting for their application to be processed. Once an individual receives refugee status, they can enter a Reception and Integration System (SAI). Unlike CAS, this program has a 6-month time limit, but it can be renewed for up to 2 years if the integration objectives are not met within the initial timeframe.

After completing their time in both CAS and SAI, if a person has not yet achieved social integration or autonomy in the country, the Italian government offers projects with specific targets and objectives to welcome such individuals. Similar to the SAI, these projects have a limited duration. Still, it is often observed that refugees may transition from one project to another due to the challenges in achieving integration and autonomy, making their integration into society even more difficult.

It is essential to consider that in the Italian government, refugee status is granted for a period of 5 years. If an individual wishes to extend their refugee status, they must undergo a reevaluation of their initial conditions by appearing before the commission. Alternatively, they have the option to transition to other statuses, such as seeking employment. Additionally, after a period of 10 years, they are eligible to apply for Italian citizenship.

Outline of research

The primary objective of this research was to explore and compare the migration narratives of refugee women in Mexico and Italy. Additionally, the study aimed to promote the co-construction of narratives highlighting the participants' resources, skills, and strengths in overcoming difficulties.

This research is informed by a socio-constructionist perspective (Gergen, 2009) that views reality as co-constructed through social interactions and narratives. Additionally, it incorporates an intercultural perspective, which acknowledges the dynamic nature of cultural identities and the importance of intercultural dialogue in understanding diverse experiences.

The study employed a qualitative research design (Flick, 2009) utilizing episodic interviews. This method allows participants to narrate their experiences through episodes, focusing on specific events and contexts. The data collected through these interviews was analyzed using reflexive thematic analysis (Braun & Clarke, 2006, 2019), emphasizing researcher reflexivity and the co-construction of themes with participants.

The study adhered to ethical standards, including obtaining informed consent, ensuring participant confidentiality, and maintaining anonymity throughout the research process. Collaborations with NGOs helped facilitate ethical recruitment and interaction with participants.

Participants

The research involved eight participants: four from Nigeria, who immigrated to Padua, Italy, and four from Venezuela, who immigrated to diverse cities in Mexico, reflecting a balance between different cultural and geographical backgrounds**.** All participants were adults, with ages ranging from 24 to 50 years. These individuals sought refugee status upon arrival in either Mexico or Italy, and their requests were subsequently approved in each

instance. The participants were selected based on their willingness to participate in the study, ensuring a diversity of backgrounds and experiences relevant to the research topic.

The women were contacted through non-governmental organizations (NGOs) specializing in these cases. Specifically, a collaboration was formed with UNHCR (United Nations High Commissioner for Refugees) for the Venezuelan women and with Cooperativa Il Sestante and Centro Mondo Amico in Italy for the Nigerian women .

The Nigerian group arrived in boats through Libya in search of better opportunities and economic independence to help their families. In contrast, the Venezuelan participants were escaping their home country's socio-political and economic crisis.

Participants varied in terms of education and professional backgrounds, ranging from individuals with university-level education to those with primary or secondary education. Their time since requesting refugee status ranged from four to twelve years. All participants reside independently or in the host country's refugee reception centers.

Each participant was provided with information about the research's purpose and gave informed consent before interviews were conducted.

The episodic interviews were conducted in 2024. For the Nigerian women, they took place at the offices of Coperativa Il Sestante (Via Stefano dall'Arzere, 18/A, 35132 Padova PD) and Centro Mondo Amico (Via Armistizio, 285, 35142 Padova PD) in Italy. In contrast, the interviews for the Venezuelan women were conducted online; these interviews were conducted and recorded with Zoom. The researcher (Andrea Castellanos Ibarra) conducted the interviews in the participant's native language, with English used for the Nigerian women and Spanish for the Venezuelans. Subsequently, the Spanish interviews were translated with the assistance of a system. Following this, all interviews were transcribed and meticulously reviewed to facilitate further analysis.

These eight participants were chosen to provide a range of perspectives on the challenges and experiences faced by individuals seeking refugee status in different circumstances.

Data Analysis

The material consisted of eight interviews, lasting approximately one hour each. The criteria for reflexive thematic analysis proposed by Braun and Clarke (2006) were utilized. The thematic analysis adhered to the six phases delineated by Braun and Clarke.

The first phase involved familiarizing by thoroughly reading and re-reading the textual material. In this phase, notes of relevant or notable things were added to be further analyzed. Subsequently, a preliminary data analysis was conducted by reviewing the transcripts and capturing their thoughts, ideas, and emerging themes. In this phase, label codes were added and generated to data with interesting and pertinent information to the research question. The third phase involved searching for similar codes to find potential patterns of shared meaning that came to a core concept. Subsequently, in the fourth phase of reviewing and developing themes, a thorough reexamining of these themes occurred to ensure that truthfully meaningful patterns were shown with previously done coding. Also, the "story" each of them recounted was analyzed. The fifth phase entailed the definitive refining, definition and naming of the main themes in which it had to be guaranteed that each theme's scope and core concept was captured. Lastly, in the sixth phase, the production of the report involved the selection of the most representative and compelling extracts based on the research questions and the themes derived from the analysis.

Thus, each interview involved familiarization, initial coding, searching for themes, reviewing, defining, naming, and writing the report and interpretation.

To thoroughly explain the findings from the interviews while maintaining the confidentiality of the participants, their initials will be used throughout the analysis. This approach protects their privacy while allowing to effectively discuss their insights and experiences.

To explain the findings of the interviews and to uphold confidentiality, the participants' initials will be used.

Reflexive TA is as a *fully* qualitative approach involving qualitative research *techniques*, underpinned by qualitative research *values*. As a researcher, you are like a storyteller; the stories you tell about your data are inevitably shaped by your personal positioning, lived experience, assumptions, and expectations about the topic. A base conceptual understanding for (good) reflexive TA is that you're not seeking to be a neutral, unbiased observer and reporter. (Braun et al., 2022, p.25)

Taking this into account, as proposed by Braun and Clarke, reflexive thematic analysis is a powerful tool for researchers seeking a flexible, interpretive, and in-depth approach to analyzing qualitative data. It differs from more structured approaches, such as coding

reliability TA and codebook TA, which are more concerned with consistency and predefined frameworks. Therefore, this type of analysis is well-suited for this research as it explores complex social issues, subjective experiences, and the co-construction of meaning between the researcher and participants.

3.3 Results

Based on the eight interviews, this section examines the findings from the research participants from Nigeria (1,2,3,4) and Venezuela (5,6,7,8). This section will present the key themes identified through reflexive thematic analysis. The analysis explores how the dominant migration narratives were co-constructed with the participants and what themes emerged about migration experiences, challenges, and resilience. Through the RTA, we identified six major themes throughout all the interviews.

1. Escaping crisis

The theme of *Escaping crisis* emerged consistently across the interviews. This theme includes various reasons for migration, such as economic instability, personal safety concerns, life-threatening situations, loss of essential utilities, deplorable conditions, and political unrest. Participants were compelled to leave their home countries due to a combination of these factors. Additionally, some participants chose to migrate due to dissatisfaction with their home country or to seek stability following the economic crisis in their country of origin.

For example, Participant 6 spoke about Venezuela's *"loss of basic utilities"* and how this triggered her migration decision:

"No electricity. That is, there was no electricity, no water, no public transportation. There was no cash because everything worked with electricity. So, when I saw that, well, I had no electricity for three, four days, the light never came. I said no, no, I can't live like that. Besides, we went to many protests in peaceful marches that were supposed to be peaceful, and they ended very badly".

Similarly, participant 5; highlighted the "*scarcity of resources*" in Venezuela as a significant driver: "I was in a truck and in a supermarket, there was a line of, I don't know, like 500 people. And I swear I said no, I don't want to go on living like this".

Additionally, participant 7 (Venezuela) and participant 8 (Venezuela) highlighted their "*fear of persecution"* and "*threats to personal safety"* as motives and triggers to migrate to a new country: "…that there was already so much difficulty in Venezuela or we saw that the situation was getting worse. And I am a human rights activist. Ahm already had several acquaintances in jail, and I felt closer and closer the probability that I would also be persecuted". - participant 8 (Venezuela)

"I'm not going to say no, but it was a war that happened between the criminal gangs that were in my country. So, there were shootings here, shootings there, and everything was around my house". – participant 7 (Venezuela)

On the other hand, participant 4 (Nigeria) explains her "dissatisfaction with her home country" and her difficulty in it as a motive for migrating: "I would say I had quite a difficult life in Nigeria. So, I left one day, I just left." Additionally, participant 2 (Nigeria) explains her "*seeking a better life"* as the principal motive for migration: "Okay. So, they say that if you have good handwork, you can make more money in Italy. So, I said, okay, it's good. Is opportunity it's a fine opportunity. So, I took it. That's why I'm here". Similarly, participant 1 (Nigeria) reflected on her situation in Nigeria and emphasized personal safety as a critical factor in her decision to leave, stating, *"I know that if I was still in Nigeria, I wouldn't be safe. What happened to me there would never have happened if I had been somewhere else."* This illustrates the complex and varied motives for migration, ranging from economic instability to life-threatening conditions and the pursuit of safety.

2. **Adapting to life's unpredictable storms**

All participants reported significant emotional, psychological, and physical challenges during their migration journeys, such as being kidnapped or forced to do prostitution. Several participants also mentioned the extreme contrast between what they thought would be their migration journey and what actually happened, even advising other women never to take such a risk as life itself is a 50/50 game where one practically survives by chance.

For Participant 2 (Nigeria), crossing the desert and being kidnapped in Libya was a traumatic experience that deeply impacted her ability to trust people in Italy. "…when I was

kidnapped. When I was kidnapped. There in Libya. Yes. That when someone helped me out of the kidnapping place. So, he took me in, but then used me for money exchange".

Similarly, participant 1 (Nigeria) detailed her experiences of exploitation and abuse, describing how she "pretended to faint" to survive "My friend was killed in front of me, and that's why I pretended to be dead so they wouldn't hurt me.". participant 1 (Nigeria) further elaborated on the brutality she endured: *"The man tore my shirt and raped me; two or three of them raped me."* She also experienced extreme abuse as a form of punishment, saying, *"He put pepper on my private parts because I told her I didn't want to do it anymore."* Additionally, she described financial exploitation: *"They made me pay 150 euros every Friday for the room, 100 euros for food, but they never gave me food."* Likewise, participant 4 (Nigeria) explains her story of abuse, explaining the brutalities she went through: "Do you know when I was in Nigeria, and I was raped about more than six times? Not with, not with one person, I mean. Sometimes three people at once. More than six different times. With multiple men. Sometimes five of them". - participant 4 (Nigeria)

False promises and misinformation were also central to participants' experiences. For example, participant 1 (Nigeria) was deceived by her aunt, who misled her family about the true purpose of her journey: *"I was deceived by my aunt. She told my mom that she would put me in school, but that was a lie."*

Additionally, many of the participants described and retold their journey difficulties, especially those who had to go through Libya in order to arrive in the host country. Participant 2 (Nigeria) explains how her survival skills were the main priority when inhabiting Libya: "So, you don't have time to learn anything. Just try to survive, look for something, not to, uh, mingle with bad people, you know. That's it. Saying you have some skills. No, there's no skills. Because there is not just a country that you can feel relaxed and learn something. Maybe you have skills. No. The country is just for you to overcome it. And hopefully and God by your side, you live and go to where you are going to. That's just it". - Participant 2 (Nigeria)

Moreover, participants also frequently described the constant risk of being raped or beaten by authority figures during their migratory journey. For example, participant 3 (Nigeria) and participant 4 (Nigeria) explained the different strategies they used and the precarious conditions they had to endure to be safer: "So for you to avoid violence, rape

and all that, You have to just be in the house all day 24 hours of the day. You don't go out You don't even get to see the sun". - participant 3 (Nigeria). "…You don't even get to see the sun, so you just stay and be hoping for the day they will say, okay, fine, this is the final day that you're leaving for Italy" - participant 3 (Nigeria).

"When we hear that they are coming like we hear the sound of their car from far, we start running inside, like you have to run for your life. Because if they meet you outside, they might beat you to death. So you have to, we run, we run on top of each other just to get inside. And when you get inside, you just have to lay down and fool yourself. Don't let them meet you sitting or speaking" - participant 4 (Nigeria).

On the other hand, some of the participants talk about their grief and the difficulty of moving forward once they are in the host country: "…it's, it's painful, it's very painful. And this, this migratory mourning lasted me about two years, and the people I've seen around me have lasted close to that too" - Participant 7 (Venezuela).

"I had episodes like that of crying, I mean, suddenly, anything reminds you of your family and food, you miss it. Anything, anything triggers something there in your head that says wow, look where I am so far away, but you have no choice" – Participant 6 (Venezuela).

The participants' journeys illustrate the profound physical, emotional, and psychological toll migration takes, particularly for those facing exploitation, violence, false promises, and abuse. Despite their resilience in the face of such adversities, the lingering grief and trauma persist, affecting their ability to trust and move forward. Their stories highlight the brutality of their experiences and the strength required to endure and survive in search of safety and stability.

3. Navigating uncharted waters

The theme *"Navigating through Uncharted Waters"* highlights the challenges migrants face as they attempt to adapt to new environments while confronting numerous obstacles. Under the subtheme *"Adaptive Strategies for Thriving in New Environments,"* participants describe their efforts to survive and thrive despite systemic discrimination, legal obstacles, bureaucratic challenges, and language barriers. The narratives reveal how underemployment, economic exploitation, and paperwork difficulties force migrants to develop survival strategies, often in hostile environments.

Bureaucratic challenges

Such as those described by Participant 5 (Venezuela) and Participant 6 (Venezuela), highlight how lengthy and convoluted processes—exacerbated by circumstances like the COVID-19 pandemic—make accessing work permits or family reunification particularly difficult. Participant 5 (Venezuela) recalls how "the process was too tedious. I didn't have the resources to do it either because here, the paperwork for work or family reunification is not so accessible." Similarly, participant 6 (Venezuela) shares how the pandemic delayed their paperwork process: "We were interviewed several times. Only when we arrived, the pandemic started, that is, we arrived in January, and in March, the pandemic started, so the whole process for us took a little longer." These experiences highlight how logistical barriers leave migrants in a state of limbo as they try to navigate new and often unwelcoming systems.

System discrimination

Compounds these difficulties, as several participants describe feeling singled out because of their nationality. Their accounts reveal how systemic barriers manifest through discriminatory practices, particularly in immigration processes. Participant 5 (Venezuela) describes the bias they encountered when seeking refuge: "It seemed crazy to me that when I went to ask for refuge, a person who works there told me, "Are you sure that you want to ask for refuge in one of the most dangerous places in the world?" Another interviewee shares the emotional toll of being treated poorly: "…she was extremely rude and that gives me anxiety and I had to seek for a psychiatric out of myself" - Participant 4 (Nigeria). These accounts reflect the emotional strain and fear accompanying encounters with immigration systems. Participant 1 (Nigeria) captures the ongoing sense of disbelief and isolation she faces due to systemic discrimination: "Even after I left Libya, I still feel that nobody believes me. They think I'm lying, and I have to prove myself again and again." The stories reveal how systemic discrimination perpetuates feelings of fear and exclusion, making it difficult for migrants to feel secure or welcome. The stories reveal how systemic discrimination perpetuates feelings of fear and exclusion, making it difficult for migrants to feel secure or welcome.

Legal obstacles

Play a significant role in shaping their experiences. participant 5 (Venezuela) expresses the frustration of being treated differently due to their nationality: "I have everything, and that's what bothers me; it's like my biggest trauma. That is to say that because of my nationality they put obstacles in my way for everything, to enter anywhere. It's like, oh, no, this Venezuelan is going to stay here." This constant struggle to prove legitimacy and overcome legal barriers further isolates migrants and reinforces feelings of being unwelcome.

Participant 1 (Nigeria) echoes similar struggles, sharing: "When I arrived, I didn't trust anyone, and I didn't have any papers. Without documents, I couldn't go to the hospital." Participants like Participant 1 (Nigeria) also faced *paperwork difficulties*, stating: "They never helped me with documents, and without documents, I couldn't go to school or work." She adds, "Without papers, I had no access to healthcare, and it's difficult to get help without the right documents."

Language barriers

Likewise, it adds another layer of difficulty to migrants' adaptation process. Despite sharing the same language on the surface, the nuances between dialects in different Spanish-speaking countries, like Mexico and Venezuela, can create confusion and misunderstandings. Participant 8 (Venezuela) mentions that despite speaking the same language, her daughter did not understand. "I mean, even though we speak Spanish in Mexico and in Venezuela, she wasn't able to understand." Participant 7 (Venezuela) echoes this sentiment, noting, "We do not speak the same language. We definitely do not speak the same language and do not have the same meanings to every word." This linguistic gap extends beyond communication and impacts everyday life. Participant 7 (Venezuela) describes how language barriers hindered her ability to interact with locals: "I don't understand. I do not understand. And I want to talk to people, and people don't understand me. I want to go to the supermarket and people don't know what I'm saying." Participant 2 (Nigeria) also touches on this challenge, highlighting the sense of isolation language can cause: "Just the language, you know. When you don't know to speak language and you don't understand it very well. It's also difficult, so." These quotes reveal how language, or even variations within the same language, can make social integration

challenging, often leaving migrants feeling isolated and disconnected from their surroundings.

Hostile environments

It also contributes to the challenges migrants face. Participants describe encounters that expose them to hostility and prejudice, which exacerbate feelings of alienation. For instance, Participant 4 (Nigeria) shares a particularly painful experience of being insulted: "…She actually called me one time a prostitute. Like a prostitute because I did my makeup, and I posted it." These instances of hostility make it even harder for migrants to feel safe or accepted in their new environments, forcing them to adapt while navigating prejudice and isolation.

The combination of bureaucratic inefficiency, discrimination, legal barriers, language difficulties, and hostile environments exemplifies the various systemic obstacles that migrants must navigate, and yet their continued pursuit of stability and belonging speaks to their unwavering hope for a better future.

4. **Between Two Worlds**

The theme of Between two worlds, complemented by the subtheme of *Identity and Belonging,* revealed how participants negotiated their sense of self after migration and how they dealt with integration challenges, such as cultural differences and professional displacement. For example, participants explained the hardships of overcoming identity crises and professional displacement. Participant 7 (Venezuela) shares how accepting her identity as a migrant was a long process: "But saying you are a migrant is like a cold-water bath that tells you that I am no longer from anywhere".

These identity negotiations often caused feelings of displacement, guilt, and emotional distress. For Participant 8 (Venezuela), the guilt of leaving her country and family behind as a human rights activist was overwhelming: *"I felt that I had abandoned my company, eh? And sometimes nothing else. The fact of not being well, I felt bad. I mean, or if one of my companions was arrested, I was not there to help… Feeling guilty about leaving them, feeling guilty about me, being safe and them not."* Participant 6 (Venezuela) also experienced a tug between her sense of safety and her yearning for home: *"…So, of course, if you get hit by the nostalgic memories, you miss your family, but I tried to focus on*

the positive things." Similarly, Participant 5 (Venezuela) expressed her deep concern for her family, saying, *"...for me, it is difficult to be here and to know that my family, I do not know if they are eating like me or... if they get the same medicines as I do."*

For many, their attempts to reconcile their identities in the host country left them feeling *"rooted in transition"* Participant 7 (Venezuela) describes the emotional toll of trying to belong in a new environment while retaining cultural ties to her Venezuelan roots: "And that uprooting feels like an emptiness, a hole in the middle of the body that is very difficult to replace. And as a migrant, you are like seeing everything, you are checking everything, everything sees the sky. The sky is not the same color. You see, the clouds are not the same shape. You see, the buildings don't look like yours. You see the way they walk, you see the way they dress. And there's nothing that you're there in a proper way because you don't belong, there's not, there's not something that you can hook into. No matter how much you check. You see the plants; you see the trees and the trees? You don't recognize them because they are not like yours. You know?".

Participants also faced *integration challenges*, which further complicated their experiences of belonging. Participant 1 (Nigeria) expressed feeling misunderstood in Italy, saying: *"Here in Italy, I feel safer, but people don't understand what I went through."* Also, Participant 1 (Nigeria) described how her personal circumstances, such as having a child at a young age, created barriers to social integration: *"People always laugh at me because I had my baby when I was young, and that makes it hard to make friends."* Similarly, Participant 1 (Nigeria) shared her frustration with the cultural stereotypes imposed on her, saying: *"In the project, they don't understand us Africans, and they think we are all the same, but we are not."* These stories highlight the difficulty migrants face as they attempt to navigate new cultural and social environments, often feeling isolated and disconnected. The judgment she faced for her young motherhood also impacted her confidence: *"I don't want people to know me because they will judge me. They always call me baby because I had my child when I was young."*

The narratives of identity, belonging, and integration challenges reveal the deep emotional and cultural struggles migrants face when adapting to life in a new country. Language barriers, societal judgment, and the longing for home create a sense of displacement and isolation. For many, the journey to reconcile their past identities with

their present circumstances continues as they navigate between two worlds—seeking stability in a foreign land while holding on to the ties of their homeland.

5. Resilience in action

Despite the severe challenges, a recurring theme of *Resilience in action* was present across the interviews. This theme allowed us to observe the different strategies and skills the participants used and acquired due to their decision to migrate. As well as all the challenges that this decision entailed and how they were able to cope with it using different coping mechanisms. In this theme, we also observed, as its title says, a lot of resilience from the participants who turned pain into strength and how this was a tool to achieve personal growth.

Participant 5 (Venezuela) how her curiosity and desire to be instructed and find the means allowed her to overcome obstacles: "…I think that's what made me overcome all the obstacles. I mean instructing me all, I mean, I think that was like the biggest skill, the fear, getting rid of the fear. I think that that was a skill". "…now, literally, everything I start now, I finish. And I think that has been the greatest experience I have taken from all this".

Likewise, Participant 7 (Venezuela) shares her experience of realizing that there are various ways of looking at the world and not just the set perspective that you're taught at home: "…emigrating teaches you that you are not what you studied or what you worked for. You are everything you decided to be". -"I realized that there are many more things you can do and that the limitations are only in you. I realize that there are many ways of looking at life, that life is not only what you were taught at home, that life is how you want to see it".

Coping mechanisms were an essential part of participants' resilience strategies. Participant 1 (Nigeria) described how music helped her manage her emotional pain: *"Sometimes if I just want to forget it, I love to play music… Music I used to play, so I forget about her."* Yet, despite her efforts to cope, she admits: *"Sometimes if I think about it, I always have pain in my head… I try to forget about the memory, but I don't know how to."* This illustrates how migrants, while resilient, still wrestle with emotional scars.

Another skill that most of the participants mentioned as crucial and fundamental to their process was the ability to adapt to their new environment. For instance, Participant 8

(Venezuela) spoke of learning to accept change: "…Accepting change, adapting. Learning to adapt. Ah, I am not so anxious anymore. I think people get very anxious about the future. And that part I have learned to, like, I'm not saying that I don't worry sometimes, but I try to flow and, well, accept it, yes? and then, like, hand over the things that I don't control to God". Participant 4 (Nigeria) echoed this sentiment, saying: "…I would say it's just the spirit of trying to adapt to everything, my situation. Because when I see a situation the way it is, I can quickly adapt to that situation".

Personal growth was another important theme that emerged, with participants expressing pride in how they had evolved through the migration experience. For example, Participant 2 (Nigeria) reflected on her emotional resilience: "Yes. Fearless. Because when I think of things I've been through, I just feel like, sometimes I cry when I think about things that I was not even expecting, but here I am. I overcome it and I'm still here. So, I just cry tears of joy, you know." Participant 3 (Nigeria) shared how her difficult experiences shaped her into a stronger person: "So, that's actually, that trauma, that pain that I went through with that pregnancy, beats me and gave me another version of fearless. Of being strong. Of being brave. Of making me think that I am this, I am in this world alone and I can do it alone by myself." Reflecting on the whole journey, Participant 1 (Nigeria) proudly declared: "I'm proud to be fearless and independent. I think this is what I get in my life after everything."

Finally, some of the participants mentioned how their experience allowed them to be more open to other people and to be more empathetic with those who were in their place. For example, Participant 6 (Venezuela) mentioned "…I think I am more empathetic, maybe not so much or even tolerant. I think I have always been but. Empathetic with what others go through".

The participants' resilience in the face of severe challenges underscores the transformative power of migration. They could turn adversity into strength through coping mechanisms, adaptation, and personal growth. Their stories reveal how resilience helped them survive and empowered them to thrive and extend empathy to others on similar journeys.

6. Finding Peace

The theme *"Finding Peace"* captures the emotional and material journey of migrants striving to achieve stability and fulfillment in their new environments. Under the subtheme *"Hope and Aspirations for a Better Future,"* participants emphasize the importance of building community, gaining independence, and working towards financial and emotional stability. The pursuit of peace is intricately linked with their ability to create support networks, adapt professionally, and ensure a secure future for themselves and their families. For many, building a community became a crucial strategy for overcoming migration challenges. As Participant 7 (Venezuela) describes, "I think that the most satisfying thing that I can say is that I started working in the migrant shelter where I was living," reflecting how engaging with a supportive community provided personal and professional fulfillment. Additionally, Participant 7 (Venezuela) explains that "making community, for me was the most important thing," underscoring how establishing connections with both Dominicans and fellow Venezuelans offered a sense of belonging and strength during a challenging transition.

A key part of this journey toward peace is *building new support networks*. Participant 6 (Venezuela) highlights how a network of friends and family became an essential source of stability, saying, "I had my boyfriend and here we made a network of friends… we had these cousins I told you about and they had other friends." This connection to others is vital for emotional well-being and overcoming isolation. For many, building these relationships became a way to integrate into their new environment, reinforcing their sense of purpose and helping them thrive despite the challenges they faced. Participant 1 (Nigeria) shared a similar experience, stating: "I have one friend, Natasha, who tries to make me happy and helps me feel comfortable with my baby."

Participants also shared that *community served as a source of strength* in times of difficulty. Participant 7 (Venezuela) reflects on the emotional support she received: "I see them as my family… they have been a source of strength to me and to my kids." This shared strength allowed participants to push forward despite the instability they faced.

For many migrants, achieving *stability* was about finding emotional peace and establishing a secure life free from fear. Several participants emphasize how stability has brought tranquility to their lives. Participant 5 (Venezuela) shared, "Well, right now I have a very quiet life. I mean, I don't have to worry about, any. If there is no water, if there is no

electricity… for me it is like I have everything." Others echoed similar sentiments of relief, noting that they no longer face the threats or shortages that characterized life in their home country. Participant 4 (Nigeria) illustrates this change drastically: "I, for me, I am, I am in a place called home. Like, I'm no longer in a terrifying place." Participant 6 (Venezuela) Aalso highlights how achieving a stable professional life was part of their journey to peace, stating, "It was like my goal to have a stable life in a job that I liked. And well, thank God I made it." Participant 1 (Nigeria), who faced multiple challenges along her journey, expressed that her *gaining independence* through work was a source of strength: "I work because it makes me feel strong and independent. I want to keep moving forward with my baby." The participants' narratives underscore the importance of stability, both in terms of emotional security and practical necessities, as a critical element in their pursuit of peace.

Finally, *future goals* are significant in maintaining hope and driving the participants forward. Many migrants expressed aspirations for a better future, both for themselves and their families. Participant 5 (Venezuela), for example, shared their desire to close their academic cycle and buy a house, saying, "I still want two things: to close the academic cycle and also to be able to buy a house here." Similarly, Participant 1 (Nigeria)shared her ambition to further her education, stating: *"I just want to be educated… and be a lawyer."* Others, like Participant 3 (Nigeria), have ambitious goals, such as becoming a top-list model or starting a business that supports others. Participant 8 (Venezuela)echoes this sentiment with a desire to open a center for building resilience: "I call it a center for building resilience… a center so that people who come to Mexico… can have humanitarian aid and be comforted." These future-oriented goals reveal how participants remain motivated by a vision of a better, more stable life, reinforcing their determination to achieve peace in their new environments.

In summary, *"Finding Peace"* encapsulates the multifaceted efforts of migrants to establish stability, community, and security in their new lives. Participants have found ways to survive and thrive by building support networks, striving for financial independence, and focusing on future goals, illustrating the resilience and hope underpinning their journey toward peace.

Table 1

Results of Reflexive Thematic Analysis

Theme	Subtheme	Codes
Escaping Crisis	Motives of migration / Migration as survival	Safety, Seeking stability, Life-threatening situations, Deplorable conditions, Economic crisis and instability, Political instability, Seeking a Better Life, Fear of persecution, Dissatisfaction with home country, Personal safety concerns, Threats to personal safety, Economic Collapse, Lost of basic utilities, Scarcity of resources.
Adapting to Life's Unpredictable Storms	The dissonance between expectations and reality	Deception in migration decisions, Grief, Discrimination, Isolation, Kidnapping, Fear of authority, Risk of death, False promises and misinformation, Journey difficulties, Emotional numbness/ emotional detachment, Trauma and psychological impact, Physical hardship, Betrayal, Diminished dreams, Physical and sexual abuse

Navigating Uncharted Waters	Adaptive strategies for thriving in new environments	Underemployment and Economic Exploitation, Legal obstacles, Survival strategies, Bureaucratic challenges, Paperwork difficulties, Language barriers, System discrimination, Hostile environments
Between Two Worlds	Identity and belonging	Professional Displacement, Integration challenges, Family separation and guilt, Negotiating new identities, Cultural differences, Maintaining cultural identity, Identity crisis, Loss of professional identity
Resilience in Action	Resourcefulness in the face of adversity	Coping mechanisms, Psychological coping strategies, Transformation through trauma, Adaptability, Turning Pain into strength, Rebuilding trust, Impact of trauma on security, Self-reliance, Overcoming fear, Personal growth
Finding Peace	Hope and aspirations for a better future	Building new support networks, Community as a Source of strength, Social integration and support,

		Building community, Professional adaptation, Desire for a home, Financial independence, Focus on the end goal, Gaining independence, Ensuring a safe future, Stability, Future goals

Note. This table presents the themes, subthemes, and associated codes identified through reflexive thematic analysis.

Chapter 4: Conclusions

This chapter addresses the research questions proposed in this study, which aimed to explore the dominant migration narratives among refugees, the similarities and differences in themes co-generated by participants, and the possibility of co-constructing narratives that enhance the resources of participating refugees. Utilizing a socio-constructionist and intercultural approach, this section examines the findings from the research participants from Nigeria (1,2,3,4) and Venezuela (5,6,7,8). The discussion delves into how these participants experienced migration, how they built resilience, and their ability to transform their narratives of struggle into those of strength, community, and hope for the future.

The dominant migration narratives that emerged from the interviews reveal the overarching themes of crisis, survival, and the pursuit of security. Participants from Venezuela and Nigeria shared strikingly similar experiences regarding their reasons for fleeing their home countries. Many highlighted the collapse of essential services, extreme economic hardship, and threats to their personal safety as motivating factors. The theme of 'Escaping Crisis' encapsulated these stories, as participants described their migration as a necessary escape from unsustainable conditions.

Nigerian participants, on the other hand, emphasized violent conflict and personal safety concerns as their primary reasons for migration. Participant 1 (Nigeria), for instance, explained that remaining in Nigeria was not an option due to the ongoing violence in her community: 'I know that if I was still in Nigeria, I wouldn't be safe. What happened to me there would never have happened if I had been somewhere else.' Many Nigerian participants also shared experiences of exploitation and trafficking, particularly during their migration through Libya, where they were often subjected to abuse and dehumanization. These narratives of survival reflect the intense emotional and physical toll of migration as participants fled life-threatening conditions and endured dangerous journeys.

Beyond the immediate dangers and crises that triggered migration, the participants' narratives reveal more profound psychological struggles related to uprootedness and identity. Venezuelan participants, in particular, expressed a profound sense of loss and emotional displacement, which compounded their experience of migration. This sentiment highlights the psychological toll of migration, as participants were forced to leave behind

their homes, cultural identities, and social networks. While survival was a dominant theme, these narratives also reflected the emotional complexity of migration, including feelings of guilt, fear, and the loss of a stable sense of self.

The co-generated themes from the participants' experiences revealed both similarities and differences in their migration journeys, highlighting the unique challenges faced by each group while also showing common patterns in their adaptive strategies. One fundamental similarity was the emphasis on community-building as a central coping mechanism. Participants from Venezuela and Nigeria discussed the importance of building new support networks to overcome isolation and find strength in their new environments. This underscores how refugees across different cultural backgrounds recognized the value of solidarity and social support as essential components of their survival.

However, there were notable differences in the participants' narratives, particularly regarding their integration experiences and the barriers they faced in adapting to new environments. Venezuelan participants frequently spoke of the emotional challenge of reconciling their identities as Venezuelans while adjusting to life in a new country. Participant 7 (Venezuela) shared her struggle with this dual identity, saying, 'I realized that there are many more things you can do and that the limitations are only in you... that life is not only what you were taught at home, that life is how you want to see it.' This sense of identity crisis and adaptation was a recurring theme among the Venezuelan participants, who described their migration as a physical and emotional uprooting process.

In contrast, Nigerian participants often emphasized the legal and systemic challenges they faced during and after migration, including experiences of exploitation, discrimination, and bureaucratic difficulties. Participant 1 (Nigeria) explained the frustrations of navigating these barriers: "They never helped me with documents, and without documents, I couldn't go to school or work." Additionally, Nigerian participants frequently discussed their experiences with systemic discrimination, particularly in their host countries, where they felt they had to prove their legitimacy constantly. These differences reveal the varied ways in which migration impacts individuals depending on their cultural, social, and legal contexts.

Despite these differences in their migration journeys as well as their country of origin and destination, the participant's narratives also revealed common strategies for

adaptation and resource-building. The theme of 'Resilience in Action' highlighted how Venezuelan and Nigerian participants used coping mechanisms, such as building new communities, gaining independence, and pursuing education, to overcome their challenges. This demonstrates how refugees are not only passive victims of their circumstances but active agents in their own empowerment.

The findings suggest that it is indeed possible to co-construct a narrative that enhances the resources of the participating refugees. Through a socio-constructivist lens, it becomes evident that the process of sharing experiences, building support networks, and fostering a collective sense of identity and purpose plays a crucial role in empowering refugees. By focusing on their strengths and capabilities, participants could co-construct narratives that acknowledge their struggles and celebrate their achievements and resilience.

The Role of Co-Constructed Narratives in Shaping Refugee Experiences

From the beginning, the theme of Escaping Crisis reveals the diverse yet interconnected reasons behind the decision to migrate, ranging from economic instability to political unrest and threats to personal safety. The results highlight how refugees' narratives about leaving their home countries are shaped by complex factors that intertwine personal, political, and economic motivations. These narratives are not just stories of displacement but also of survival and the pursuit of safety. In this context, co-constructing these narratives with refugees involves creating a space where their diverse motives for migration are acknowledged and validated.

By engaging refugees in the co-construction of their stories, their agency and resilience become central components of the narrative. This is critical because it shifts the discourse from focusing purely on vulnerability to highlighting their resourcefulness and capacity to adapt and overcome challenges. For example, many participants described their experiences of fleeing life-threatening conditions and how their decision to leave was both a form of resistance and self-preservation. Co-constructing these migration narratives can enhance their psychological and social resources by providing a sense of agency, empowerment, and control over their life stories.

Building Emotional and Psychological Resources Through Shared Narratives

The second theme, Adapting to Life's Unpredictable Storms, illustrates migration's emotional and psychological toll on refugees. Participants recounted harrowing experiences such as kidnapping, exploitation, abuse, and the trauma of navigating dangerous routes, including Libya. These experiences highlight the importance of emotional resilience and coping mechanisms in the survival of refugees. Co-constructing a narrative around these experiences is not merely about recounting the trauma but about reframing it as part of a broader story of resilience and survival.

For instance, participants such as participant 2 (Nigeria) and participant 1 (Nigeria) shared how they managed to survive despite unimaginable hardships, including rape and exploitation. These stories, when co-constructed, allow refugees to process their trauma, integrate their experiences into their identities, and build emotional resources. By actively participating in creating their narratives, refugees can redefine their experiences in ways that foster healing and growth, moving beyond the role of victimhood to one of resilience.

As illustrated in the interviews, participants often described their strategies to cope with their situations, such as developing survival skills and learning to navigate hostile environments.

Enhancing Social and Legal Resources: Navigating New Systems

The theme of Navigating Uncharted Waters reveals the systemic challenges that refugees face as they try to adapt to new environments, including bureaucratic inefficiencies, systemic discrimination, legal barriers, and language difficulties. These challenges hinder their integration and diminish their access to vital resources such as work permits, healthcare, and social services. Co-constructing narratives with refugees in this context can help highlight these barriers, create awareness, and drive systemic change.

These stories, when co-constructed, can amplify the voices of refugees and serve as a powerful advocacy tool to push for policy changes that improve their access to legal and social resources. By engaging in narrative co-construction, refugees are not just passive subjects of systemic discrimination; they become active participants in the fight for their rights, drawing attention to the gaps in the system and the need for reforms.

Moreover, co-constructing these narratives with refugees can enhance their social resources by helping them build stronger networks within their host communities. As the results demonstrate, language barriers and cultural differences often exacerbate feelings of

isolation and disconnection. By sharing their experiences in a co-constructed narrative, refugees can foster empathy and understanding among host communities, potentially opening up opportunities for greater social integration and support.

Identity, Belonging, and the Search for Stability

The theme Between Two Worlds captures the profound sense of identity crisis and displacement that many refugees face as they navigate life in their host countries. Co-constructing narratives around these experiences can be a powerful tool for helping refugees reconcile their past identities with their present realities. In this sense, co-constructed narratives become a resource for emotional and cultural resilience. By engaging refugees in shaping their own stories, they are allowed to reflect on their sense of self and belonging. This reflection can be an important step toward identity reconstruction, helping them to integrate their pre-migration identities with their current experiences. For instance, participants expressed a deep connection to their home countries, even as they adapted to new environments. By framing their stories within this context, co-constructed narratives can help refugees retain a sense of cultural continuity while also fostering adaptation and growth in their host countries.

Resilience as a Resource: Turning Pain into Strength

Resilience in Action is one of the most prominent themes that emerged from the interviews. Participants repeatedly demonstrated their ability to adapt, overcome obstacles, and find new ways of thriving despite their challenges. This resilience is a vital resource that can be further enhanced through the co-construction of narratives.

By telling their stories, refugees can articulate the coping mechanisms and strategies that have helped them survive and even thrive in their new environments. These stories, when co-constructed, highlight the strengths and skills that refugees bring with them, such as adaptability, resourcefulness, and perseverance. Co-constructed narratives that focus on these positive aspects of the refugee experience can help build self-esteem and reinforce their sense of agency, turning past pain into future strength.

Community, Support, and the Pursuit of Peace

Finally, the theme Finding Peace underscores the importance of community and stability in refugees' lives. The results highlight how participants sought to build support

networks and find emotional and material peace in their new environments. Co-constructing narratives around these experiences can further strengthen their community resources by fostering connections with others who share similar experiences.

Co-constructed narratives can help reinforce these networks by providing a platform for refugees to share their stories, connect with others, and offer mutual support. Furthermore, these narratives can serve as a resource for advocacy, helping to raise awareness about the importance of community support in the refugee experience.

In conclusion, the results of this study suggest that co-constructing narratives with refugees is not only possible but also beneficial in enhancing their resources. By actively participating in creating their stories, refugees can build emotional, psychological, social, and legal resources that empower them to navigate the complexities of migration. These co-constructed narratives not only offer a means of personal healing and growth but also serve as powerful tools for advocacy, social integration, and community-building. When done collaboratively, storytelling allows refugees to transform their experiences of displacement into narratives of resilience, strength, and hope.

Limitations of the Study

1. **Language Constraints**: A vital limitation of this study was that the interviews were only conducted in English and Spanish. This language restriction prevented the inclusion of perspectives from refugee women who spoke neither of these languages. As a result, the findings may not fully capture the diversity of refugee experiences, particularly those of women from other linguistic and cultural backgrounds.

2. **Limited Cultural Scope**: This study focused on Nigerian and Venezuelan women, offering a detailed look at these two groups, but it didn't cover the experiences of women from other countries. Women from different regions often face varying challenges in cultural integration, systemic barriers, and resilience, which could add valuable insights if explored in future studies.

3. **Challenges in Accessing Participants**: Accessing participants depended on the collaboration of NGOs and local networks. This reliance may have introduced a selection bias, as only women connected to these organizations could be included. Furthermore,

logistical and time constraints during recruitment limited the diversity and number of participants in the study.

4. **Differences in Migration Contexts**: Venezuelan and Nigerian women's distinct political, economic, and social contexts led to different migration experiences. For instance, Venezuelan women were generally older and impacted by economic crises, while Nigerian women often faced violent conflicts and exploitation. Although these contextual differences were considered, a more detailed examination of these factors could have enriched the findings further.

5. **Limited Relationship Building**: Due to time constraints and challenges in accessing participants, there was little opportunity to establish a strong rapport before conducting interviews. Building trust might have encouraged more open discussions, leading to a richer and deeper understanding of the participants' experiences.

6. **Geographical and Institutional Differences**: The study highlighted differences in the support structures available to refugees in Italy compared to Mexico. However, without a comprehensive comparative analysis, it was challenging to fully explore the impact of these differences on the experiences of refugee women. Further research could delve into how policies in different countries influence refugee adaptation and integration.

Recommendations for Future prospectives

Expanding Multicultural Perspectives: Future research should aim to include participants from a broader range of linguistic and cultural backgrounds. This could involve offering additional language options or utilizing interpreters to reach more diverse groups. This would enable a more nuanced comparison of migration experiences across different cultural contexts.

Longitudinal Studies and Relationship Building: Longer-term studies could provide more time to build trust and rapport with participants, potentially leading to richer narratives. A longitudinal approach would also allow researchers to observe how resilience and coping strategies evolve over time.

Examining Policy and Institutional Support: Given the differences in support structures between Italy and Mexico, future research could focus on how policies and NGO initiatives

impact refugee integration and well-being. Comparative studies in different host countries could help identify effective practices for supporting refugee women.

Adopting an Intersectional Approach: Building on the observed differences, future research could explore how factors such as age, gender, social class, and legal status intersect to shape refugee experiences. For example, since most Venezuelan participants were older, age could be a key factor influencing migration decisions and adaptation challenges.

Advocating for Better Legal and Social Support

The study revealed systemic barriers faced by refugees, such as legal challenges, discrimination, and limited access to essential services. Future research and advocacy efforts should focus on highlighting these issues and pushing for meaningful policy changes. Collaboration between researchers, NGOs, and policymakers is essential to raise awareness of the specific challenges faced by refugee women. Advocacy should focus on streamlining legal documentation processes, improving access to healthcare and education, and combating discriminatory practices in host communities.

Deepening Collaboration with NGOs and Support Organizations

NGOs played a crucial role in providing access to participants and facilitating trust-building in this study. Future research could strengthen these collaborations by involving NGOs throughout the research process, from design and data collection to dissemination. Partnering with these organizations can help with participant recruitment, maintain ethical standards, and ensure that the study's findings are translated into actionable community interventions. Furthermore, this collaborative approach can provide researchers with deeper insights into the challenges and support structures affecting refugees in different host countries.

Bibliography

Akhtar, S. (2011). *Immigration and acculturation: Mourning, adaptation, and the next generation*. Jason Aronson.

American Psychiatric Association. (2013). *Posttraumatic Stress Disorder*. In *Diagnostic and statistical manual of mental disorders* (5th ed., pp. 271–280). American Psychiatric Publishing. https://doi.org/10.1176/appi.books.9780890425596

American Psychological Association. (2017). *Multicultural guidelines: An ecological approach to context, identity, and intersectionality*. https://www.apa.org/about/policy/multicultural-guidelines.pdf

American Psychological Association, Guideline Development Panel for the Treatment of PTSD in Adults. (2017). *Clinical practice guideline for the treatment of posttraumatic stress disorder (PTSD) in adults*. American Psychological Association. https://www.apa.org/ptsd-guideline

Andisha, P., & Lueger-Schuster, B. (2024). Afghan refugee populations' mental health: Exploring pre-migration environmental differences and post-migration stressors. *Journal of Loss and Trauma, 29*(3), 247-274. https://doi.org/10.1080/15325024.2023.2262929

Aswad, F. M. S., & Menezes, R. (2018). Refugee and immigration: Twitter as a proxy for reality. *The Florida AI Research Society*, 253–258. https://aaai.org/ocs/index.php/FLAIRS/FLAIRS18/paper/view/17627

Babatunde-Sowole, O. O., DiGiacomo, M., Power, T., Davidson, P. M., & Jackson, D. (2020). Resilience of African migrant women: Implications for mental health practice.

International Journal of Mental Health Nursing, 29(1), 92–101.

https://doi.org/10.1111/inm.12663

Bakhtin, M. M. (1981). The dialogic imagination: Four essays (M. Holquist, Ed.; C. Emerson & M. Holquist, Trans.). University of Texas Press. (Original work published 1975)

Barbieri, A., Visco-Comandini, F., Alunni Fegatelli, D., Schepisi, C., Russo, V., Calò, F., Dessì, A., Cannella, G., & Stellacci, A. (2019). Complex trauma, PTSD and complex PTSD in African refugees. *European Journal of Psychotraumatology, 10*(1), Article 170062. https://doi.org/10.1080/20008198.2019.170062

Bennett, M. J. (1993). Towards ethnorelativism: A developmental model of intercultural sensitivity. In R. M. Paige (Ed.), Education for the intercultural experience (pp. 21-71). Intercultural Press.

Blukacz, A., Cabieses, B., & Markkula, N. (2020). Inequities in mental health and mental healthcare between international immigrants and locals in Chile: A narrative review. *International Journal for Equity in Health, 19*(1). https://doi.org/10.1186/s12939-020-01312-2

Boccagni, P. (2017). Aspirations and the subjective future of migration: Comparing views and desires of the "time ahead" through the narratives of immigrant domestic workers. *Comparative Migration Studies, 5*(1). https://doi.org/10.1186/s40878-016-0047-6

Boubeker, A. (2010). Abdelmalek Sayad, pionnier d'une sociologie de l'immigration postcoloniale. In N. Bancel, F. Bernault, P. Blanchard, A. Boubeker, A. Mbembe, & F. Vergès (Eds.), *Ruptures postcoloniales* (pp. 37–48). La Découverte.

Boudou, B. (2021). Migration and the critique of 'state thought': Abdelmalek Sayad as a political theorist. *European Journal of Political Theory, 22*(3), 399–424. https://doi.org/10.1177/14748851211041906

Brance, K., Chatzimpyros, V., & Bentall, R. P. (2024). Social identity, mental health and the experience of migration. *British Journal of Social Psychology*. https://doi.org/10.1111/bjso.12745

Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology, 3*(2), 77–101. https://doi.org/10.1191/1478088706qp063oa

Braun, V., & Clarke, V. (2020). Can I use TA? Should I use TA? Should I not use TA? Comparing reflexive thematic analysis and other pattern-based qualitative analytic approaches. *Counselling and Psychotherapy Research, 21*(1), 37–47. https://doi.org/10.1002/capr.12360

Braun, V., & Clarke, V. (2021). Conceptual and design thinking for thematic analysis. *Qualitative Psychology, 9*(1), 3–26. https://doi.org/10.1037/qup0000196

Braun, V., Clarke, V., Hayfield, N., Davey, L., & Jenkinson, E. (2022). Doing reflexive thematic analysis. In *Springer eBooks* (pp. 19–38). https://doi.org/10.1007/978-3-031-13942-0_2

Brewer, S., Tejeda, L., & Meyer, M. (2022). *Struggling to survive: The situation of asylum seekers in Tapachula, Mexico*. WOLA Advocacy for Human Rights in the Americas. https://www.wola.org/wp-content/uploads/2022/06/FINAL-Struggling-to-Survive-Asylum-Seekers-in-Tapachula.pdf

Brown-Bell, D. (2019). The impact of refugee resettlement on community integration and well-being: A case study in Niagara (Master's research paper, Brock University). Brock University.

https://dr.library.brocku.ca/bitstream/handle/10464/15001/2019_Brock_Denese_Brown-Bell_MRP.pdf?sequence=1&isAllowed=y

Bruner, J. (1990). *Acts of Meaning*. Harvard University Press.

Buse, N. A., Burker, E. J., & Bernacchio, C. (2013). Cultural variation in resilience as a response to traumatic experience. *Journal of Rehabilitation, 79*(2), 15–23.

Byram, M. (1997). Teaching and assessing intercultural communicative competence. Multilingual Matters.

Cámara de Diputados del H. Congreso de la Unión. (2014, October 30). *Ley sobre refugiados, protección complementaria y asilo político*. *Diario Oficial de la Federación*. https://www.dof.gob.mx/

Cantalapiedra, E. T., Pombo, M. D. P., & López, E. E. G. (2021). El sistema de refugio mexicano: entre proteger y contener. *Frontera Norte, 33*, 1–26. https://doi.org/10.33679/rfn.v1i1.2103

Carroll, H., Luzes, M., Freier, L. F., & Bird, M. D. (2020). The migration journey and mental health: Evidence from Venezuelan forced migration. *SSM - Population Health, 10*, 100551. https://doi.org/10.1016/j.ssmph.2020.100551

Carswell, K., Blackburn, P., & Barker, C. (2011). The relationship between trauma, post-migration problems and the psychological well-being of refugees and asylum seekers. *International Journal of Social Psychiatry, 57*(2), 107–119. https://doi.org/10.1177/0020764008105699

Castañeda, H., Holmes, S. M., Madrigal, D. S., Young, M. D., Beyeler, N., & Quesada, J. (2014). Immigration as a social determinant of health. *Annual Review of Public Health, 36*(1), 375–392. https://doi.org/10.1146/annurev-publhealth-032013-182419

Chiara, G., & Romaioli, D. (2021). The challenge of migratory flows in the

Mediterranean sea to psychology: A single case study from a social constructionist

perspective. *Journal of Constructivist Psychology, 34*(1), 98–115.

https://doi.org/10.1080/10720537.2019.1701591

Chiara, G., Romaioli, D., & Contarello, A. (2022). Self-positions and narratives

facilitating or hindering posttraumatic growth: A qualitative analysis with migrant women

of Nigerian descent survivors of trafficking. *Psychological Trauma: Theory, Research,*

Practice, and Policy, 15(6), 1041–1050. https://doi.org/10.1037/tra0001245

Choy, B., Arunachalam, K., S., Taylor, M., & Lee, A. (2020). Systematic review:

Acculturation strategies and their impact on the mental health of migrant populations.

Public Health in Practice, 2, 100069. https://doi.org/10.1016/j.puhip.2020.100069

Cloitre, M., Courtois, C. A., Ford, J. D., Green, B. L., Alexander, P., Briere, J.,

Herman, J. L., Lanius, R., Stolbach, B. C., Spinazzola, J., Van der Kolk, B. A., & Van der

Hart, O. (2012). The ISTSS expert consensus treatment guidelines for complex PTSD in

adults. *International Society for Traumatic Stress Studies.*

https://terrorvictimresponse.ca/wp-content/uploads/ISTSS-Expert-Concesnsus-Guidelines-

for-Complex-PTSD-Updated-060315.pdf

Cole, E. R. (2009). Intersectionality and research in psychology. *American*

Psychologist, 64, 170–180.

Comisión Mexicana de Ayuda a Refugiados. (2016, February 23). *Asistencia*

institucional. Comisión Mexicana De Ayuda a Refugiados. Retrieved October 2, 2024, from

https://www.gob.mx/comar/acciones-y-programas/asistencia-institucional

Comisión Mexicana de Ayuda a Refugiados. (2016, February 29). *Procedimiento*

para ser reconocido como refugiado en México. https://www.gob.mx/comar/acciones-y-

programas/procedimiento-para-ser-reconocido-como-refugiado-en-mexico

Cook, J. M., Newman, E., & The New Haven Trauma Competency Group. (2014).

A consensus statement on trauma mental health: The New Haven Competency Conference

process and major findings. *Psychological Trauma: Theory, Research, Practice, and Policy,*

6, 300–307. http://dx.doi.org/10.1037/a0036747

Dangmann, C., Solberg, Ø., & Andersen, P. N. (2021). Health-related quality of life

in refugee youth and the mediating role of mental distress and post-migration stressors.

Quality of Life Research, 30(8), 2287–2297. https://doi.org/10.1007/s11136-021-02811-7

De Leo, A., Cotrufo, P., & Gozzoli, C. (2021). The refugee experience of asylum

seekers in Italy: A qualitative study on the intertwining of protective and risk factors.

Journal of Immigrant and Minority Health, 24(5), 1224–1236.

https://doi.org/10.1007/s10903-021-01296-3

De Micco, V. (2014). Trapiantare/tramandare: legami e identificazioni nei transiti

migratori. *Interazioni, 1*, 32–46.

Elshahat, S., Moffat, T., & Newbold, K. B. (2021). Understanding the healthy

immigrant effect in the context of mental health challenges: A systematic critical review.

Journal of Immigrant and Minority Health, 24(6), 1564–1579.

https://doi.org/10.1007/s10903-021-01313-5

Flick, U. (2022). *Doing interview research: The essential how to guide.* Sage

Publications.

Freier, L. F. (2018, July 2). Understanding the Venezuelan displacement crisis. *E-International Relations.* https://www.e-ir.info/2018/06/28/understanding-the-venezuelan-displacement-crises/

Galemba, R. B. (2024). Transit as racialized space: Comparing perceptions of refugees along the Mexico–Guatemala border. *The Journal of Latin American and Caribbean Anthropology*, 1–12. https://doi.org/10.1111/jlca.12741

Garcia, A. (2007). International refugee law in Mexico. *ISIL Year Book of International Humanitarian and Refugee Law, 7*, 203–228.

Gergen, K. J. (2009). *Relational being: Beyond self and community.* Oxford University Press.

Giacco, D. (2019). Identifying the critical time points for mental health of asylum seekers and refugees in high-income countries. *Epidemiology and Psychiatric Sciences, 29*. https://doi.org/10.1017/s204579601900057x

Gleeson, C., Frost, R., Sherwood, L., Shevlin, M., Hyland, P., Halpin, R., Murphy, J., & Silove, D. (2020). Post-migration factors and mental health outcomes in asylum-seeking and refugee populations: A systematic review. *European Journal of Psychotraumatology, 11*(1). https://doi.org/10.1080/20008198.2020.1793567

Hamblen, J. L., Norman, S. B., Sonis, J. H., Phelps, A. J., Bisson, J. I., Nunes, V. D., Megnin-Viggars, O., Forbes, D., Riggs, D. S., & Schnurr, P. P. (2019). A guide to guidelines for the treatment of posttraumatic stress disorder in adults: An update. *Psychotherapy, 56*(3), 359–373. https://doi.org/10.1037/pst0000231

Hamblen, J. L., & Schnurr, P. P. (2024). Clinical practice guidelines for PTSD. *National Center for PTSD.* https://www.ptsd.va.gov/publications/rq_docs/v35n1.pdf

Henning, J. A., & Brand, B. L. (2019). Implications of the American Psychological Association's posttraumatic stress disorder treatment guideline for trauma education and training. *Psychotherapy, 56*(3), 422–430. https://doi.org/10.1037/pst0000237

Hermans, H. J. M. (2001). The dialogical self: Toward a theory of personal and cultural positioning. *Culture and Psychology, 7*(2), 243–281. https://doi.org/10.1177/1354067X0173001

Hook, J. N., & Watkins Jr., C. E. (2015). Cultural humility: The cornerstone of positive contact with culturally different individuals and groups? *The American Psychologist, 70*(7), 661–662.

Hou, W. K., Liu, H., Liang, L., Ho, J., Kim, H., Seong, E., & others. (2020). Everyday life experiences and mental health among conflict-affected forced migrants: A meta-analysis. *Journal of Affective Disorders, 264*, 50–68. https://doi.org/10.1016/j.jad.2019.11.165

Hovey, J. D., & Magaña, C. (2000). Acculturative stress, anxiety, and depression among Mexican immigrant farmworkers in the midwest United States. *Journal of Immigrant Health, 2*(3), 119–131. https://doi.org/10.1023/a:1009556802759

Ichikawa, M., Nakahara, S., & Wakai, S. (2006). Cross-cultural use of the predetermined scale cutoff points in refugee mental health research. *Social Psychiatry and Psychiatric Epidemiology, 41*(3), 248–250. https://doi.org/10.1007/s00127-005-0016-2

Iglesias, E., Montserrat, C., Llosada-Gistau, J., & Gallart, J. (2023). The well-being of unaccompanied migrant children: Between dreams and reality. *Children and Youth Services Review, 157*, 107389. https://doi.org/10.1016/j.childyouth.2023.107389

Institute of Medicine (IOM). (2011). *Clinical practice guidelines we can trust.* The National Academies Press.

Jammet, Y. (2013). Abdelmalek Sayad. Les années d'apprentissage. In Yacine, T., Jammet, Y., & Montlibert, C. (Eds.), *Abdelmalek Sayad: La découverte de la sociologie en temps de guerre* (pp. 17–127). Éditions nouvelles Cécile Defaut.

Jannesari, S., Hatch, S., Prina, M., & Oram, S. (2020). Post-migration social–environmental factors associated with mental health problems among asylum seekers: A systematic review. *Journal of Immigrant and Minority Health, 22*(5), 1055–1064. https://doi.org/10.1007/s10903-020-01025-2

Kleist, N., & Thorsen, D. (2016). Hope and uncertainty in contemporary African migration. In *Routledge eBooks.* https://doi.org/10.4324/9781315659916

Kuhner, G. (2002). Detention of asylum seekers in Mexico. *Refuge Canada's Journal on Refuge, 58–64.* https://doi.org/10.25071/1920-7336.21264

Leutert, S. (2020). Migrant protection protocols: Implementation and consequences for asylum seekers in Mexico. *PRP 218*. https://doi.org/10.26153/tsw/8999

Liddell, B. J., Byrow, Y., O'Donnell, M., Mau, V., Batch, N., McMahon, T., Bryant, R., & Nickerson, A. (2020). Mechanisms underlying the mental health impact of family separation on resettled refugees. *Australian & New Zealand Journal of Psychiatry, 55*(7), 699–710. https://doi.org/10.1177/0004867420967427

Löbel, L. (2019). Family separation and refugee mental health–A network perspective. *Social Networks, 61*, 20–33. https://doi.org/10.1016/j.socnet.2019.08.004

Lubkemann, S. C. (2008). Involuntary immobility: On a theoretical invisibility in forced migration studies. *Journal of Refugee Studies, 21*(4), 454–475.

Mains, D. (2012). *Hope is cut: Youth, unemployment, and the future in urban Ethiopia.* Temple University Press.

Marques, L., Eustis, E. H., Dixon, L., Valentine, S. E., Borba, C. P. C., Simon, N., Kaysen, D., & Wiltsey-Stirman, S. (2016). Delivering cognitive processing therapy in a community health setting: The influence of Latino culture and community violence on posttraumatic conditions. *Psychological Trauma: Theory, Research, Practice, and Policy, 8*(1), 98–106.

Martin, A., Naunton, M., Kosari, S., Peterson, G., Thomas, J., & Christenson, J. K. (2021). Treatment guidelines for PTSD: A systematic review. *Journal of Clinical Medicine, 10*(18), 4175. https://doi.org/10.3390/jcm10184175

McAuliffe, M., & Triandafyllidou, A. (Eds.). (2021). *World migration report 2022.* International Organization for Migration (IOM).

McAuliffe, M., & Oucho, L. A. (Eds.). (2024). *World migration report 2024.* International Organization for Migration (IOM).

McGuire, S., & Martin, K. (2007). Fractured migrant families. *Family & Community Health, 30*(3), 178–188. https://doi.org/10.1097/01.fch.0000277761.31913.f3

Monkman, K., Frkovich, A., & Proweller, A. (2022). Navigating precarity in educational contexts. In *Routledge eBooks.* https://doi.org/10.4324/9781003258223

Mougenot, B., Amaya, E., Mezones-Holguin, E., Rodriguez-Morales, A. J., & Cabieses, B. (2021). Immigration, perceived discrimination and mental health: Evidence from the Venezuelan population living in Peru. *Globalization and Health, 17*(1). https://doi.org/10.1186/s12992-020-00655-3

Nante, N., Gialluca, L., De Corso, M., Troiano, G., Verzuri, A., & Messina, G. (2016). Quality of life in refugees and asylum seekers in Italy: A pilot study. *PubMed, 52*(3), 424–427. https://doi.org/10.4415/ann_16_03_14

Napolitano, F., Gualdieri, L., Santagati, G., & Angelillo, I. F. (2018). Violence

experience among immigrants and refugees: A cross-sectional study in Italy. *BioMed*

Research International, 2018, 1–8. https://doi.org/10.1155/2018/7949483

National Institute for Health and Care Excellence. (2018). *Post-traumatic stress*

disorder (NICE Guideline No. 116). https://www.nice.org.uk/guidance/ng116

Norcross, J. C., & Wampold, B. E. (2019). Relationships and responsiveness in the

psychological treatment of trauma: The tragedy of the APA Clinical Practice Guideline.

Psychotherapy, 56(3), 391–399. https://doi.org/10.1037/pst0000228

OIM Mexico. (2023). *Perfil migratorio de México organización internacional para*

las migraciones (OIM) boletín anual 2023 estadísticas migratorias para México. Retrieved

August 3, 2024, from https://mexico.iom.int/sites/g/files/tmzbdl1686/files/documents/2024-

03/estadisticas-migratorias-2023.pdf

Perez, A. (2020). Doing politics by other means: Abdelmalek Sayad and the political

sociology of a collective intellectual. *The Sociological Review, 68*(5), 999–1014.

Puvimanasinghe, T., Denson, L. A., Augoustinos, M., & Somasundaram, D. (2014).

Narrative and silence: How former refugees talk about loss and past trauma. *Journal of*

Refugee Studies, 28(1), 69–92. https://doi.org/10.1093/jrs/feuO9

Renner, A., Hoffmann, R., Nagl, M., Roehr, S., Jung, F., Grochtdreis, T., König, H.,

Riedel-Heller, S., & Kersting, A. (2019). Syrian refugees in Germany: Perspectives on

mental health and coping strategies. *Journal of Psychosomatic Research, 129*, 109906.

https://doi.org/10.1016/j.jpsychores.2019.109906

Saada, E. (2000). Abdelmalek Sayad and the double absence: Toward a total

sociology of immigration. *French Politics, Culture & Society, 18*(1), 28–47.

Sayad, A., Bourdieu, P., & Macey, D. (2004). *The suffering of the immigrant.*
http://ci.nii.ac.jp/ncid/BA66552373

Sayad, A. (2004). *The suffering of the immigrant* (D. Macey, Trans.). Cambridge:
Polity.

Sayad, A. (2006). *L'immigration ou les paradoxes de l'altérité, vol. 2: Les enfants
illégitimes.* Paris: Raisons d'agir.

Schick, M., Zumwald, A., Knöpfli, B., Nickerson, A., Bryant, R. A., Schnyder, U.,
& Morina, N. (2016). Challenging future, challenging past: The relationship of social
integration and psychological impairment in traumatized refugees. *European Journal of
Psychotraumatology, 7*, Article 28057. https://doi.org/10.3402/ejpt.v7.28057

Selee, A., & Bolter, J. (2020). *An uneven welcome: Latin American and Caribbean
responses to Venezuelan and Nicaraguan migration.* Migration Policy Institute.
https://www.migrationpolicy.org/research/latin-american-caribbean-responses-venezuelan-
nicaraguan-migration

Sheath, D., Flahault, A., Seybold, J., & Saso, L. (2020). Diverse and complex
challenges to migrant and refugee mental health: Reflections of the M8 Alliance Expert
Group on Migrant Health. *International Journal of Environmental Research and Public
Health, 17*(10), 3530. https://doi.org/10.3390/ijerph17103530

Shin, R. Q. (2015). The application of critical consciousness and intersectionality as
tools for de-colonizing racial/ethnic identity development models in the fields of counseling
and psychology. In R. Goodman & P. Gorski (Eds.).

Sladkova, J. (2007). Expectations and motivations of Hondurans migrating to the
United States. *Journal of Community & Applied Social Psychology, 17*(3), 187–202.
https://doi.org/10.1002/casp.886

Solberg, Ø., Vaez, M., Johnson-Singh, C. M., & Saboonchi, F. (2019). Asylum-seekers' psychosocial situation: A diathesis for post-migratory stress and mental health disorders? *Journal of Psychosomatic Research, 130*, 109914. https://doi.org/10.1016/j.jpsychores.2019.109914

Tarsitani, L., Todini, L., Roselli, V., et al. (2020). Somatization and traumatic events in asylum seekers and refugees resettled in Italy. *Journal of Psychopathology, 26*, 41-5. https://doi.org/10.36148/2284-0249-374

Turrini, G., Purgato, M., Ballette, F., Nosè, M., Ostuzzi, G., & Barbui, C. (2017). Common mental disorders in asylum seekers and refugees: Umbrella review of prevalence and intervention studies. *International Journal of Mental Health Systems, 11*(1). https://doi.org/10.1186/s13033-017-0156-0

United Nations Educational, Scientific and Cultural Organization. (2013). Intercultural Competences: Conceptual and Operational Framework. UNESCO.

UNHCR - The UN Refugee Agency. (n.d.). *Convention and Protocol relating to the status of refugees.* UNHCR. https://www.unhcr.org/media/convention-and-protocol-relating-status-refugees

United Nations High Commissioner for Refugees. (2016). *Global strategy beyond detention: A global strategy to support governments to end the detention of asylum-seekers and refugees: Mexico progress under the global strategy beyond detention 2014-2019, mid-2016.* Retrieved October 2, 2024, from https://www.unhcr.org/media/unhcr-global-strategy-beyond-detention-progress-report-mid-2016

United Nations High Commissioner for Refugees. (2024). *Fact sheet Mexico.* Retrieved October 2, 2024, from https://reporting.unhcr.org/mexico-factsheet-9158

United Nations High Commissioner for Refugees (UNHCR). (2024). *Informe operacional ACNUR México: Enero - Mayo 2024.* United Nations High Commissioner for Refugees (UNHCR). https://www.acnur.org/mx/media/mexico-esperanza-de-un-nuevo-hogar-2023-principales-resultados-acnur-mexico

United Nations High Commissioner for Refugees (UNHCR). (2024, June). *Fact sheet - Internal displacement in Mexico.* United Nations High Commissioner for Refugees (UNHCR). https://www.acnur.org/

United Nations High Commissioner for Refugees (UNHCR). (2024, July). *Shelters fact sheet - Mexico.* United Nations High Commissioner for Refugees (UNHCR). https://www.unhcr.org/

Vitus, K. (2021). Forming the capacity to aspire: Young refugees' narratives of family migration and wellbeing. *Journal of Youth Studies, 25*(3), 400–415. https://doi.org/10.1080/13676261.2021.1886263

Waters, A., & Asbill, L. (2013, August). Reflections on cultural humility. *CYF News.* Washington, DC: American Psychological Association. Retrieved from http://www.apa.org/pi/families/resources/newsletter/2013/08/cultural-humility.aspx

Willers, S. (2022). Negotiating survival: Central American refugee women in Mexico and the politics of deservingness. *Social Inclusion, 10*(4). https://doi.org/10.17645/si.v10i4.5739

Wilson, J. P. (2007). The lens of culture: Theoretical and conceptual perspectives in the assessment of psychological trauma and PTSD. In J. P Wilson & C. S. Tang (Eds.), *Cross cultural assessment of psychological trauma and PTSD* (pp. 3–30). Springer.

World Health Organization. (2022, June 17). *Mental health: Strengthening our response.* https://www.who.int/news-room/fact-sheets/detail/mental-health-strengthening-our-response

World Health Organization. (2022). *World mental health report: Transforming mental health for all.* Geneva, Switzerland: Author. https://creativecommons.org/licenses/by-nc-sa/3.0/igo/

Wu, S., Renzaho, A. M. N., Hall, B. J., Shi, L., Ling, L., & Chen, W. (2020). Time-varying associations of pre-migration and post-migration stressors in refugees' mental health during resettlement: A longitudinal study in Australia. *The Lancet Psychiatry, 8*(1), 36–47. https://doi.org/10.1016/s2215-0366(20)30422-3

Zimmerman, C., Kiss, L., & Hossain, M. (2011). Migration and health: A framework for 21st century. *PLoS Medicine, 8*(5), e1001034. https://doi.org/10.1371/journal.pmed.1001034