

Bilingual and Trilingual Clinical Consultation

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By

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PREFACE

The importance of communication dominated my thoughts when I was a little child and started school. My mother tongue is Kurdish, but I had to read, write, and speak in Persian. As only the Persian language was allowed in education, there were many words and phrases that I did not understand, but I could not ask my teacher because we were not allowed to speak Kurdish at school. I could not formulate the question in Persian, though my teacher was a Kurdish speaker. One day when I asked my teacher where Uganda was on the map, he did not dare answer my question but said: “First you have to learn Persian, then you can ask such questions.” When I learned Persian, I acted as an interpreter for my relatives when the Persian-speaking authorities visited the village and asked about accounting, health, and many other issues. Although sometimes I felt proud of my language skills and sometimes was rewarded, it was not a fun task for me, because I was very afraid of the authorities who were very mean to the villagers. When I was fifteen years old, I heard that a Kurdish man had received a long prison sentence just because of a communication misunderstanding, which upset me. The man was hotly suspected of supporting the banned Kurdish Democratic Party. During the trial, he had a Kurdish interpreter who had a different dialect to his. In answer to the question, “Do you want to continue to support the banned party?” he answered, “*Male Orbán*,” meaning “Never my lord.” However, the interpreter perceived this as “*Bale Orbán*,” meaning “Yes my lord”; he therefore received a long prison sentence. When I finished my education in emergency care in Iran, a war was being fought between Iran and Iraq. The villagers in the war zone were evacuated to the city of Marivan. Almost 80 percent¹ of them were illiterate and had a Kurdish dialect called *Gorani*, which differs from the main Kurdish dialect in the same way that Swedish differs from Danish. Therefore, a care staff was needed who had knowledge of the *Gorani* dialect, which I had. My father had the same dialect, and as a writer I was interested in the different Kurdish dialects. I started working in the emergency room. “Before you

¹ This is the percentage of the population over ten years of age who were illiterate forty years ago; for the entire population and in the current situation, the percentage is different.

started working here, we had a lot of problems with our patients due to communication disorders,” said a nurse there.

One day a patient said that he was in pain in his *Dom*, which means “penis.” Everyone laughed at him and said the man had no “judgment,” because they had translated the word directly into Persian, and in Persian the meaning of the word is “tail.”

When I was in prison in Iraq, a fellow prisoner was violently assaulted because of a communication misunderstanding. In answer to the question of where he came from, he answered “*Mako*” which in Arabic in these contexts means “nowhere.” Before he managed to explain to the interpreter that *Mako* is the name of his hometown, he received many blows. I am convinced that people experience thousands of similar dramatic events every day around the world. My five years of experiences of working in three different refugee camps in Iraq as a caregiver, as an interpreter between Red Cross staff and Kurdish refugees, and as a client using an interpreter with Iraqi authorities has convinced me of such communication problems.

Additionally, my thirty-three years living in Sweden as a client and as an interpreter has been influenced by hundreds of communication misunderstandings. These experiences and the knowledge that I gained during these difficult years of my life have motivated me to seek a scientific solution to the communication problems that have characterized almost my entire life. As the old Kurdish expression goes, “A sick person knows more than a thousand doctors about his illness.”

CHAPTER 1

MIGRATION

I have become a queer mixture of the East and West, out of place everywhere, at home nowhere. I cannot get rid of either that past inheritance or my recent acquisitions. They are both part of me, and, though they help me in both the East and West, they also create in me a feeling of spiritual loneliness not only in public activities but in life itself. I am a stranger and alien in the West I cannot be of it. But in my own country also, sometimes I have an exile's feeling.

—Jawaharlal Nehru, *Toward Freedom*, 1942.

The history of migration is an enormous and complex subject that bridges thousands of years and involves numerous individuals moving from one place to another. Throughout history, people have migrated for various reasons, including natural disasters, economic opportunities, political instability, ethnic conflicts, environmental factors, and cultural exchange, and there have been numerous notable migrations. Some of the earliest known migrations include the movements of early human populations out of Africa and across the globe. These migrations eventually led to the colonization and settlement of various regions, shaping the demographic and cultural landscapes of continents such as Europe, Asia, and the Americas. Many times, even in modern times, forced migration has been a tool to change the ethnic demography for a political purpose to disrupt a group of people or seize valuable land. The nineteenth and twentieth centuries witnessed significant migration waves. Examples include European migration to the Americas, including the massive influx of European immigrants to the United States.

The period also saw the forced migration of African slaves to the Americas during the transatlantic slave trade. Even though migration has been a part of human history for millennia, World War II brought about one of the largest forced migrations in history, with millions of people being displaced and seeking refuge. The partition of India and Pakistan in 1947 led to massive migration, resulting in communal violence and displacement.

The post-war era also saw the migration of people from former colonies to their colonizers, such as the movement of people from African and

Caribbean nations to the United Kingdom. In recent times, global migration has changed; many people have chosen to move to find better living conditions, safety, and opportunities in different wealthy countries, especially the United States and Europe.

The Syrian refugee crisis, for example, has led to a significant influx of refugees into neighboring countries and Europe. Economic migration from regions with limited prospects to more developed countries is also common.

A short history of human migration

The movement of people from one place to another in attention to settling temporarily or permanently in a new location is called migration. The issue of migration differs from one occasion to another. It may involve only a small number of people, for example, the movement of one family from a village to the nearest city a short distance away to find better living conditions. Sometimes, it involves a large number of people covering a long distance who experience danger and complications as they make their way, such as the migration of millions of people from Asia to Europe and America due to the constant wars in this area. Similarly, during the 1990s because of civil war and violence, thousands of people fled their homes in Liberia, traveling 750 miles to Canada.

Due to humanitarian and economic crises and political instability, many of these movements have crossed national boundaries, leading to dramatic increases in both internal and external migration during recent decades. This has meant that people's movement may appear either as internal migration, which happens in the country of origin, or as external migration, where people move from their country of origin to another country.

The number of internal migrations is somewhat larger than migration from a country of origin to another country. Depending on the intention and reason for displacement, people who migrate from one place to another place can be divided into three different categories—migrants, refugees, and asylum seekers—all of which will be discussed later.

No one knows exactly when the first *Homo sapiens* (or intelligent humans) appeared, or in which part of the world, but the oldest species of *Homo sapiens*, which lived in Ethiopia, dates back about 195,000 years. As has been documented by historians, about 1.8 million years ago humans began to migrate from Africa to the parts of Europe and Asia that were closest to Africa, then moved forward to other parts of Europe and Asia, and later to North America, Australia, and South America.

According to historical documents and research, human migration had a significant impact on human evolution. Scientists estimate that today's

humans evolved from their homeland in Africa about sixty thousand years ago. Seeking to find a better place to live, they began to move to other parts of Africa and later to other parts of the world.

In order to search for food and to hunt, humans moved northward from East Africa and entered the Middle East. According to the literature, there are two theories about the path of human migration to the Middle East. The first theory tells us that human immigrants entered Asia from the Sinai Peninsula.

There is another opinion, based on which humans came out of their original homeland via the Bab al-Qaida strait, where the distance between Africa and the Arabian Peninsula is minimal. On the other hand, at that time, due to the Ice Age, when ocean water was trapped in the polar icecaps, the sea level was lower than today, and therefore the distance between the two landmasses at the Bab al-Qaida Strait was much lower than today. Humans continue to migrate at this location. After a few thousand years, the first examples of humans could be found in the continent of Oceania.

On the basis of historical documents, about thirty thousand years ago, humans entered the American continent after crossing the Bering Strait, which separates Siberia in Asia from Alaska in America. At that time, due to the freezing of the ocean surface during the Ice Age, the two landmasses were connected to each other, and hunters living in Siberia crossed this passage to the new continent and from there spread out. The reasons to support this theory are the similarities in the shape of the skull and jaws of the inhabitants of North America thirty thousand years ago with those of the people of their time who lived in Siberia and North China. Europe was conquered by people who migrated from the Middle East and Central Asia. This migration process started forty-five thousand years ago; migration and the settlement of *Homo sapiens* on the European continent was completed within fifteen thousand years.

Migration to Australia

On the basis of scientific opinion, migration to the Australian continent at this time must have been difficult for humans, because Australia is separated from Southeast Asia by the ocean and is surrounded by sea.

During the last ice age, the distance between this continent and Asia was less because most of the water was frozen. But sometime more than fifty thousand years ago, humans traveled across fifty miles of open sea to Australia. They must have built a very strong sailing ship to survive the journey and reach Australia. Their construction was one of the masterpieces of technology that went beyond making a spear or lighting a fire. (The tasks

that are considered to have been common for the first humans at that time include only hunting with handmade stone spears and lighting fires). Therefore, building a ship is considered extraordinary for that era. A rock painting from the Macassan Prahu people of Arnhem Land shows a ship. The evidence shows that these people set foot on this continent with the intention of conquering it. In fact, the first humans arrived at the northwest coast of Australia between forty thousand and sixty-five thousand years ago. Archaeological evidence shows that the Aboriginal people of Australia had been in contact with the Makasan Prahu people and the people of southern Indonesia for the past two thousand years and have shared their ideas, technology, and culture with each other. Aboriginal people eventually spread across the Australian continent and formed a society based on hunting birds, fish, and animals, as well as agriculture. Now the Australian Aborigines are the only remaining survivors of the second wave of migration from Africa and the first race of humans in Africa to live outside their place of origin.

Archaeologists have found evidence dating back fifty thousand years in a cave in western Australia, solving the oldest question of settlement and entry into Australia. Archaeologists from the University of Western Australia on Barrow Island in northwestern Australia have found remains of the lives and hunting activities of the first people who set foot on this land. This cave was separated from the main island by sea level rises seven thousand years ago. In this cave, explorers have found hunting tools for the first humans, which date back fifty thousand years—that is, long before it became a place for Australian aboriginal families to live ten thousand years ago. The leader of the archaeologists, Peter Wyeth, writes: “This issue brings back the time of occupation here to much earlier, to 47,000 years ago, if we say conservatively. Even older dates can be presented.” The researchers stated that this site represents the longest-running record of diet in Australia. “Barrow Island has a rich record of ancient artifacts, the gathering and hunting of marine and terrestrial animals, and environmental cues that indicate the use of a coastal desert area,” according to Peter Wyeth.

About seven thousand years ago, when the sea level rose and finally separated it from the mainland, the inhabitants of this cave left. Elsewhere, researchers along with archaeologists in Australia using modern and new technologies have been able to discover that the first humans who set foot in Australia were skilled sailors. Scientists estimate that these natives set foot in Australia with a precise and predetermined plan and a population of about one hundred to two hundred people. The inhabitants of northwestern Australia are considered to be the survivors of the first human migration to Australia. Professor Peter Wyeth, in collaboration with others, simulated

hundreds of possible routes to track the possible voyages of ancient Australian passenger ships. In this research group, Dr. Uzaman, director of the Department of Archeology at the University of Western Australia, said: “These ancient travelers were skilled sailors who traveled to discover new lands.” In fact, the location of the Aborigines of Australia was not accidental. Rather, it was the result of a great migration and their skill in seafaring.

Migration and refugees from a global perspective

According to historical documents, human migration has always been a part of human life. Abraham’s exodus from Mesopotamia to the land of Canaan, the migration of the Israelites from Egypt, and the mass transfer of prisoners of war to Babylonia are examples of this human exodus. On the basis of existing classification, the reason for people leaving their own homeland may be classified into two types: the first, voluntary immigrants, and the second, refugees. In such migration, a person born in one country moves to another country that has a better status of life.

The reason for migration is often natural disaster and economic difficulty, but the reason for people leaving who have the status of refugees often differs. The largest voluntary migration of people in recent years can be considered to have taken place in the years between 1850 and 1914, when about one million people every year moved to a new place. The World Bank’s report on this matter shows that about 10 percent of the world’s population migrated during this time period.

Beside voluntary migration, there are also those who are forced to become immigrants, known as refugees, who are quite different from voluntary migrants. These kinds of immigrants are forced to leave their home country due to war or persecution and are considered refugees or asylum seekers in other countries. The Geneva Convention in 1951 examined the status of these refugees and established rules for countries accepting these refugees, one of which is that countries do not have the right to return refugees to their country of origin or to a country where they are likely to be persecuted.

According to a text from the United Nations High Commissioner for Refugees (UNHCR), a refugee is someone who “is not willing or able to return to his country of origin due to the fear of being persecuted for one of the reasons of religion, nationality, race, [or] membership in a specific social and political group”.

According to the UNHCR, a person with refugee status is “a person who owing to a well-founded fear of being persecuted for reasons of race, religion, nationality, membership of a particular social group or political opinion, is outside the country of his nationality and is unable or, owing to such fear, is unwilling to avail himself of the protection of that country; or, who not having a nationality and being outside the country of his former habitual residence as a result of such events, is unable, or owing to such fear, is unwilling to return to it.”

The problems of international migration and correct statistics have been discussed in depth: it is difficult to deduce the correct number of migrants and refugees in the world because of two main problems. First, the lack of a system for the continuous registration of international migration; even though such a system is in place, the data about this issue is not published. The second problem in this context, even though some countries produce statistics on international migration, is that the meaning and scope of those statistics vary considerably. According to Hania Zlotnik, these statistics are often partial and provide a poor basis of information.

To get reliable information about the history of migration and find trustworthy documents, first, research documents are needed; unfortunately, the oldest paper by Ravenstein that can be called a scientific study of internal migration was written in 1880 and his first systematic studies of migration was in 1885. Finally, the first research concerning migration as a social science was conducted in 1930.

In contrast, a refugee who applies for refugee status has to await a decision on the application. Refugee status is recognized by the host nation under the Geneva Convention regardless of the part of the world the refugee is seeking to be resettled in. Immigrants often have the opportunity to choose a resettlement country.

In this context, migrants do not move across the world homogeneously. Most immigrants select to go to a country with a good status and high-income, such as the United States or countries in Europe because of the greater economic and social stability in those countries.

As Table 1 shows, the majority of international migrants, 52 percent, reside in Northern America and Europe.

Table 1. Destinations of global migrants by region 2020 (source UNHCR)

	Distribution	Distribution
	Number	Share of international Migration Population (%)
Total international migration population	280,598,105	100%
Europe and Northern America	145,414,863	52%
Northern Africa and Western Asia	49,767,746	18%
Sub-Saharan Africa	22,221,538	8%
Eastern and Southeastern Asia	19,591,106	7%
Central and Southern Asia	19 427,576	7%
Latin America and the Caribbean	14,794,623	5%
Australia and New Zealand	9,067,584	3%
Oceania (excluding Australia and New Zealand)	313,069	0%

Modern migration from a global perspective

Both voluntary and forced migration have always been a part of human existence and a part of our history; however, migratory movements are constantly changing over time in terms of the numbers of immigrants, countries of origin, and reason for migration. People now leave their own homelands and move to another part of the world more than at any time previously. For several decades, many immigrants that left their homeland did so due to conflicts, natural disasters, or the effects of climate change. According to the UNHCR, the world's immigrant population has been increasing over the past thirty years and reached 281 million people, approximately 3.6 percent of the world's population, in December 2022.

The amount and distribution of international migrants varies around the world. Based on reports from the UNHCR, since 1970, the United States has most often been the country of target for international migrants: foreign-born people increased from 12 million in 1970 to 51 million in 2019. The number of immigrants in Germany made it the second highest destination for migrants, increasing from 8.9 million in 2000 to 26 million in 2020. According to the UNHCR department of Economic and Social Affairs, about 50 percent of immigrants globally lived in their region of origin or were internal immigrants during 2020. The UNHCR requires greater resources in order to cover the costs of migrants that have risen from

US\$300,000 in 1950 to US\$9.15 billion in 2021. On the basis of the UNHCR's report, during 2022 more than 100 million people were forced to flee their home country, which was 14 million more than in 2021; of this, 6.3 million were from Ukraine.

Tabel 2. Ten highest immigrant densities in the world 2020 (source UNHCR).

Country	Immigrant	% of Population
United States	50.6 million	15%
Germany	15.8 million	18.81%
Saudi Arabia	13.5 million	38.65%
Russia	11.6 million	7.97%
United Kingdom	9.4 million	13.79%
United Arab Emirates	8.7 million	88.13%
France	8.5 million	13.06%
Canada	8.0 million	21.33%
Australia	7.7 million	30.14%
Spain	6.8 million	14.63%

Migration process and mental health

According to the World Psychiatric Association (WPA), due to substantial cultural differences and language barriers between immigrants and native inhabitants in resettlement countries, access to mental health services is a significant issue. In this context, the WPW suggested a handbook is needed to provide guidance to facilitate adequate mental health services for immigrants. On the other hand, immigrants come from different cultures, and it is impossible to use the same methods to treat mental disorder among all immigrants. Even though a symptom of disease may be the same in different cultures, how pain and anxiety are expressed differs from culture to culture. When I am talking about immigrant mental health as a compound phrase, suddenly my thoughts go back to my migration process, which took four years full of fear and stress, including violence and prison. Reasons for mental illness can be divided into two groups, one group that is rooted in psychology and psychosocial factors, and one group of factors that are biological and hereditary.

In a psychological and psychosocial context, mental health refers to a person's overall emotional, psychological, and social well-being. It includes how individuals think, feel, and behave, and it affects their ability to cope with stress, make decisions, form relationships, and navigate life's challenges. Good mental health is essential for well-being and quality of life. Regarding

biological and hereditary factors (genetics, brain chemistry), life experiences (trauma, abuse, neglect), and family history of mental health problems. Additionally, social, and environmental factors such as socioeconomic status, access to healthcare, social support systems, and cultural attitudes towards mental health play a significant role. In this context, mental health issues can range from common conditions like depression and anxiety to more severe disorders such as schizophrenia and bipolar disorder.

These conditions can impact a person's thoughts, emotions, behavior, and functioning. It's important to recognize that mental health problems are real illnesses and can affect anyone regardless of age, gender, or background. Fortunately, there is growing awareness about mental health, and efforts are being made to reduce the stigma associated with seeking help. Treatment options for mental health issues include therapy, medication, support groups, and lifestyle changes. Early intervention and support can significantly improve a person's well-being and ability to manage their mental health. But unfortunately, according to my research on immigrant mental health in northern European countries, many people do not seek help for mental problems because mental illness is still taboo for many immigrants who come from the Middle East. Promoting mental health involves creating supportive environments, fostering resilience, and providing access to mental healthcare services. It also involves promoting self-care, stress management, and emotional well-being through practices like exercise, adequate sleep, healthy relationships, and seeking help when needed.

Human health has been defined as the feeling of both physical and mental health. This involves the concepts of health and health promotion. In 1948, health was defined by the WHO as "a state of complete physical, mental and social well-being and not merely the absence of disease." This means that the concept of health is a multidimensional issue. In addition to the WHO's definition, which is a scientific concept, the concept of health is defined differently during the periods of human life. This concept is culture-related, and there are varied approaches in different cultures regarding this definition. Among uneducated people in undeveloped countries, purely physical illness is recognized as illness, and they state that if a person can work, she/he is considered to be a healthy person. Conversely, there is the expression, "He is sick, but his stomach is healthy, who can believe it." This tells us that such people consider a person not to be sick not only if she/he can do her/his work but also if she/he eats normally.

According to my research and my experiences during my work in Sweden, many refugees and immigrants suffer from psychological diseases that they may have brought with them during the migration process. Unfortunately, they rarely seek help from the healthcare system in resettlement countries

because of their beliefs and their definition of illness. This is discussed in my research paper “The Influence of Sleep Disorders and Nightmares on Mental Health: A Study of Former Kurdish Peshmerga in Resettlement Countries in Northern Europe.” Despite many participants in this study suffering from mental diseases, they did not seek help from authorities for their problem; therefore, they have a negative view of the concept of mental health.

Due to the ethnic conflict between Kurdish people and the military of the countries that govern the divided Kurdistan, many Kurdish people have been forced to leave their own land and resettle in other countries. According to previous studies, many of the Kurdish refugees who have resettled in resettlement countries are suffering from post-traumatic stress disorder syndrome (PTSDS) and other mental disorders. Kurds, who live in the Middle East in an area divided between Turkey, Iran, Iraq, and Syria, are the largest non-state nation in the world, with a population of somewhere above 50 million in terms of ethnic origin. Division of the Kurdistan region occurred when the allied countries divided the defeated Ottoman territories among themselves after World War I. After the division of Kurdistan, Kurdish resistance and the fight for an independent Kurdistan caused massive forced emigration from Kurdistan to other parts of the world. Around 7–8 percent of all Kurds live outside their region of origin. The literature on refugee migration and war trauma suggests that war-wounded refugees constitute a high-risk group for mental health problems. Due to the Kurdish resistance in the Kurdistan regions in Iran, Iraq, Syria, and Turkey during the last decades, many Kurds were forced to join the Kurdish military forces (Peshmerga), which resulted in many of them coming to Sweden as refugees. The study is focused on insomnia as a mental disorder; although many of the participants have lived in one of the Scandinavian countries for many years, they still don’t want to speak about the concept of mental health.

In developed countries, talking about mental diseases is quite normal and mental illness is treated in the same way as physical illness. Unfortunately, in other areas, even though many people suffer from mental illness, there is still neither a modern definition nor a modern treatment for psychological and psychosocial diseases. For these reasons, mental illness is considered ugly, and people with such illnesses try to treat their illness by looking for a physical cause or linking their illness to some imaginary causes. We must understand that just as the body gets sick, the mind also gets sick. Just as there is medicine to treat physical illness, there is also appropriate treatment to treat mental illness. There is no doubt that the degree of attention on the treatment of diseases in any society is reflected in

the efforts to find, cure, and fight these diseases through scientific research. According to a recent report by *Modern Psychology*, 12 per cent of the world's population is covered by 96 percent of scientific research on mental illness, mostly in Western countries, while 88 percent of the world's population is covered by only 4 percent of the scientific research in the mentioned fields. This is the best evidence that these diseases are treated differently in other countries. Although economic opportunities for research may be one of the main reasons for this difference, it alone cannot account for this large difference.

Post-traumatic stress disorder syndrome (PTSDS) is the most considerable mental illness that Kurdish former Peshmerga are suffering from; but due to their attitudes to the concept of mental diseases, none of them sought care for such illnesses. Decreased mental health among former Kurdish Peshmerga was related to sleep disorders rooted in PTSDS. Difficulty falling asleep and nightmares negatively affected the participants' daily lives and their mental health. Negative thinking and traveling back to unpleasant moments in previous periods of life were mentioned as the main reason for psychological difficulties and nightmares by participants in the study.

Excepting the psychological problems mentioned by former Kurdish Peshmerga in the present study, abnormal waking also caused several physical problems. The most common physical symptoms were palpitations, sweating, dyspnea, headaches, and shivering. On the basis of the results of the study, most of the participants reported both physical and psychological problems that were caused by nightmares and abnormal awakening. One participant said she never wanted to fall asleep, because of the fear of nightmares and awakening. She stated that she hated the night, not because of the darkness, but rather because of the horror of nightmares.

I cannot remember that I have had one hour of sleep without a nightmare during the last decade of my life. In this context, I hate sleep since it is full of nightmares for me, and at the same time I know that I should sleep because I need to rest, but unfortunately there is no rest during my hour of sleep.

On the basis of experiences and literature, the process of migration may result in various types of psychological, psychosocial, and cultural problems, which in turn affects refugees' health and well-being in the resettlement countries. To be able to meet the needs of immigrants in a satisfactory way, knowledge of the psychological crisis of the immigration process is an important issue. According to the Hermanson A-C, there is a strong association between poor psychosocial well-being and pre-migration experiences of negative life in the immigrant's homeland. In this context,

there are significant differences between voluntary migration and migration by force, particularly because of ethnic and political conflicts in different parts of the world.

The reason for migration and the immigrant's background are essential for the immigrants' well-being in the country of resettlement. Migration events, such as persecution and political violence may have a significant impact on immigrants' health.

In this context, there are significant differences between voluntary immigrants and forced immigrants or refugees. Both research and experiences show that not only foreign-born people but also second-generation immigrants have an increased risk of impaired health and psychiatric disorders compared with native-born inhabitants. Thousands of refugees from other parts of the world that have been forced to leave their own countries and resettle in Sweden suffer from post-war trauma.

However, if the migration is voluntary and planned and the goal of migration is reached, it may lead to improvements in mental health compared with forced immigrants. To provide adequate social and health service for refugees with post-war trauma, the needs of war-wounded refugees should be the focus in their resettlement countries. Usually, primary healthcare is the first meeting place for refugees and healthcare staff. Adequate communication between the healthcare providers and the immigrant patient or client is therefore of utmost importance. Lack of language links and lack of confidence and trust in the healthcare system may damage the effectiveness of clinical consultations.

Sandqvist et al. studied the effects of migration factors on human well-being and health and stated that life in exile in resettlement countries may be a "beautiful prison in gold." Some factors that were mentioned in this study are social isolation, discrimination, change of social role, social disintegration, and low level of control in the resettlement country. The study has indicated that people who are targets for sociological difficulties need greater contacts with the healthcare service system. Among identified factors, a low level of control and change of identity were considered central elements that influence all parts of the migration process.

The psychological crisis of immigration

Even though forced migrants are the more vulnerable group, generally migration can lead to various psychological challenges and crises for individuals and communities. According to my research and experiences, moving to a new country often involves encountering unfamiliar cultural norms, language, and customs. These issues can create a sense of disorientation

and psychological symptoms like anxiety and confusion during the time that individuals adapt to the new environment in the resettlement place. Furthermore, because of diversity in environmental aspects, migration can prompt a reevaluation of personal and cultural identities, which may create crises. Individuals may experience conflicts between their original cultural identity and the pressure to assimilate into the culture of the resettlement country. This struggle can lead to a sense of loss, confusion, and a search for belonging.

Unfortunately, there are many mutual obstacles encountered by immigrants entering a new society, and in the beginning immigrants often face closed doors. Leaving behind established social networks and support systems can result in feelings of loneliness and isolation. Immigrants may experience difficulties forming new relationships due to language barriers, discrimination, or a lack of familiarity with social norms in the host country. The process of adapting to a new culture while maintaining one's own cultural values and traditions can be challenging. Immigrants may face discrimination, stereotypes, prejudice, and bias, which can lead to stress, low self-esteem, and a sense of marginalization.

Immigrants bring with them some aspects of culture and tradition, and the new society's norms that are considered transcultural—ones that have nothing to do with religion and ideology—are easy to adapt to. On the other hand, there is a part of culture that is rooted in religion and old customs that are very difficult to get rid of, these are called cross-cultural, which means they collide with the new norms of the resettlement country.

How the migration process unfolded and what effect the process had on individual mental health is important to keep track of regarding immigrants' psychological health. Trauma and post-traumatic stress disorder (PTSD) can be considered to be mental illnesses affecting immigrants, as some migrants flee their home countries due to conflict, violence, or persecution. These traumatic experiences can have long-lasting psychological effects, such as PTSD, depression, anxiety, and other mental health issues. In this context, it is quite important to note that while migration can bring about psychological challenges, individuals also display resilience and adaptability. Supportive environments, access to mental health services, and integration programs can help mitigate these crises and promote psychological well-being among migrants.

To be able to meet the needs of immigrants in the correct way, knowledge of the psychological crisis of immigration is quite important. In addition to the difficult experiences (war, torture, and persecution) that most immigrants have had before leaving their homeland, the encounter with the new homeland creates a series of psychological and psychosocial problems for

them, added to which is the difficulty of communication in the new society. The well-known psychologist Johan Gillberg defines a psychological crisis state as one in which one has stumbled into such a life situation that one's previous experiences and learned ways of reacting are not sufficient for one to understand and psychologically master the current situation. All the immigrant's resources (language, education, and experience) that worked quite well in the home country no longer work in the new situation. One then feels less worthy and suffers from a spontaneous mental disturbance.

In that experience, however, there is also a feeling that one's thoughts and one's person do not have much value either. As long as one doesn't know, for example, Swedish properly, one doesn't have much value. According to my experience as a refugee in Sweden, the immigrant's crisis course can be divided into two phases. In the early phase, which occurs only after a few days, the triggering factor is primarily the communication problem.

The early crisis phase subsides after a few weeks; however, this does not actually depend on any kind of handling and treatment of the crisis, but on measures that lie in the immigrant's own thoughts. "It is precisely a lack of communication skills that lies behind all my problems, if I learn the language, everything will be fine, then I will hurry up to learn the language." After one has learned the language, and also educated oneself or supplemented previous education brought from the home country, then one is expected to participate in society's various activities and influence the design of the whole in the new society. Unfortunately, the situation often does not go as expected, so then the late crisis phase begins, which is significantly stronger and more serious than the early phase. As Söderlindh believes, it is usually only after a longer time (one or two years) that one really starts to experience that one is an immigrant and always will be. And it is only then that one reacts to what it means.

Those with low or no education in their home country are stuck for a significantly longer time in the calm period in the early crisis phase, while the highly educated leave the early phase faster.

For highly educated immigrants who held a fairly good position in their home country, but for whom the new situation gives them an inferior position, a state of crisis will occur that Erik Homburg Eriksson calls a crisis that arises in the interplay between internal factors and factors in the social environment.

The conscious feeling that a personal identity is based on two simultaneous observations: one notices that one's existence has context and continuity in time and space, and one feels that others perceive one's context and continuity.

A large group of immigrants from Iran quickly fell into the late phase, and among them was a group that had participated in war and received such injuries as to cause disability. It was very important that their crisis was dealt with and addressed immediately. Sometimes you can't expect them to seek help for such mental crises, because Iranians traditionally have a completely different perception of mental healthcare. In Iran, only the dangerously mentally ill end up in psychiatric care and it feels onerous for an immigrant from Iran to seek mental healthcare, even if they suffer from mental problems. Iranians, on the other hand, do not talk about mental illnesses, but like to say "nerve problems" or "neurological problems"; they prefer to have biological explanations even for psychosomatic symptoms.

Psychodynamic thinking and concepts belonging to this direction in psychology, psychotherapy, and psychiatry are foreign even for many well-educated Iranians since these concepts belong to taboo areas. The following report in one of my studies confirm this issue:

I had not visited my mother since I came to Sweden. I was sad. I sought assistance from my social worker. I told her, I am missing my mother very much, and I wonder if she could help me so that my mother comes to Sweden. I said, I am very sad, I have no choice other than to kill myself. A day later, I got an appointment at the psychiatric clinic. That was a catastrophe for me; I never forget that she had thought that I was mad.

Migration factors that influence post-migration life

The migration process refers to the movement of individuals or groups from one place to another with the intention of settling permanently or temporarily in a new location. The specific steps involved in the migration process can vary depending on factors such as the reason for migration, the destination country's immigration policies, and the individual's circumstances. It is important to note that the migration process can be complex and may vary significantly depending on the specific circumstances and immigration policies of the destination country. Consulting with immigration experts or seeking guidance from relevant government agencies can provide more detailed and up-to-date information for one's specific situation.

On the basis of experiences and literature, the process of migration may result in various types of psychological, psychosocial, and cultural problems. The process of migration is a series of events that influence each other. Pre-migration experiences of war, persecution, political violence, and other negative life events have a significant impact on the immigrant's psychosocial well-being in the post-migration phase. In order to be able to

meet the needs of immigrants in a satisfactory way, knowledge of migration-process factors such as psychological crises is essential.

This factor influences the well-being of forced migrants or refugees more than voluntary immigrants. In my study (*The Impact of Migration on Psychosocial Well-Being: A Study of Kurdish Refugees in [Their] Resettlement Country*) participants expressed that they had been discriminated against in their home countries because of their ethnic background. They mentioned that as minorities in Iran and Iraq, they were unable to have control over their existence. They also stated that they used to speak, think, and express themselves in the Kurdish language up to the age of six at home. But when they began school, they suddenly found that their language was forbidden, and they had to switch their language from their mother tongue to Persian. This issue is remembered as humiliating for them, and its psychological negative affect remains as an uncomfortable feeling for immigrants involved in the aforementioned study.

According to the result of the study, a similar situation was experienced by immigrants in resettlement countries. Unfortunately, the discrimination experienced not only by foreign-born people but also by second generations of immigrants is not free from this risk.

Professional regression was one of the factors that influenced immigrants' mental health. A participant in my study discussed this issue as follows: "Because of the terrible pre-migration and migration experiences many have not succeeded in going on to higher education in Sweden." In this context, many immigrants work in jobs that do not require long and specific education, for example I work as a taxi driver even though I received higher education in my homeland.

This issue has resulted in professional regression, which has created anxiety for many immigrants, according to the result of the study. Furthermore, the majority of the participants in my study were forced to leave their homelands. Accordingly, they did not have the opportunity either to choose their path of escape or to plan their resettlement country. These factors might contribute to dissatisfaction, a sense of lack of control over one's own life, and the feeling of not belonging in the resettlement country, which many times have resulted in alienation for the immigrant.

In the mentioned study, a significant factor that influenced the well-being of the migrants in the new society was "loss of social capital." This loss of capital is not "caused" by the new society; rather, it appears immediately on arrival in the resettlement country.

Many of the participants also experienced "social and professional regression," which refers to changes caused by or occurring during the stay in the new society, depending on for example, an imbalance between

competence and availability of jobs, new demands and requirements not being reached, and so on.

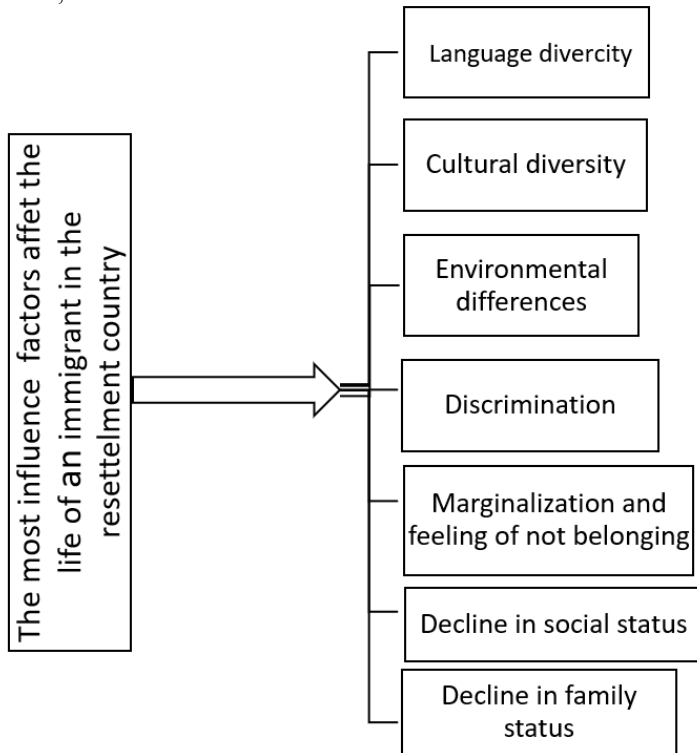


Figure 1. Some post-migration factors that influence the life of an immigrant in the resettlement country.

Post-migration factors

Language diversity

Language is one of the main elements of humans that sets the species apart from other living beings on Earth. In this context, language diversity could be recognized as the first problem when people from different parts of the world meet each other. My research has indicated that language can be a significant challenge for immigrants in resettlement countries. Learning the new language is often fundamental to being able to communicate, find work, study, make social contact, and integrate into the new society. Learning a new language can be overwhelming, especially if the language

of the resettlement country uses different sounds and has a different grammar and writing system than the immigrant's native language.

Often, immigrants are offered language courses and other resources to help them learn the language of their new home country. As I noticed during my life in Sweden, immigrants from East Europe can learn the Swedish language faster than immigrants from the Middle East. The reason is that:

- Alphabetical differences: those who come from Eastern Europe use the Latin alphabet that is common to the whole of Europe, but those who come from the Middle East use the Armani alphabet (used in Arabic, Kurdish and Persian).
- When writing with Latin alphabets, one writes from right to left; however, people using Middle Eastern languages write from left to right.
- In European languages there are many Latin and English words that have similar pronunciations.
- Finally, language is a tool for expressing and practicing culture, so there is a close connection between language and culture. In these contexts similarities in culture facilitate the learning of languages—we know that there are many more similarities in European cultures than between Middle Eastern culture and European culture.

It is quite important to overcome language barriers as soon as possible because it can be useful for immigrants both practically and emotionally. In this context, it is crucial to practice the language as much as possible by participating in community activities, socializing with native speakers, and using the language in everyday situations. Becoming fluent in a new language takes time and requires constant attempts, but participation in society's activity it is an important part of the integration process.

Cultural diversity

The concept of cultural diversity stands in opposition to *monoculture*, the global monoculture, or a homogenization of cultures; analogous to cultural evolution, it “can refer to having different cultures respect each other's differences.” In this way, it provides the opportunity for mutual exchanges of knowledge, and an increased tolerance and understanding of differences, rather than an attempt to assimilate. By being exposed to different cultures, both immigrants and native inhabitants can learn to see the world from different perspectives and develop a broader view of life. Diversity can also foster creativity and innovation. When people with different backgrounds and experiences meet, they can contribute different ideas and solutions to

problems. This can benefit society by promoting social, economic, and cultural progress. Cultural diversity is important because it promotes inclusion, respect, and equality. It is about recognizing and valuing differences while building bridges between different cultures and promoting dialogue and cooperation. By creating an environment in which everyone feels welcome and respected, communities can benefit from the rich cultural diversity that immigrants and minority groups can contribute. According to the research, states in the United States that have higher cultural diversity produce more scientific research than states with low cultural diversity or those that are monocultural.

According to my research and experience, although both language and culture are two potential sources of communication misunderstanding, cultural misunderstanding is more serious. Many people can learn the language over a period of time, which may vary for different people depending on the immigrant's background, but cultural misunderstandings can continue for a significantly longer time and sometimes for a lifetime. When it comes to lack of knowledge of the language when communicating between immigrants and native residents, there is an opportunity to minimize communication misunderstandings. In the linguistic case of ambiguity, you can ask the communication partner to speak slowly or repeat the message again; furthermore, with today's developed communication technology there are many other chances to help each other to prevent or minimize misunderstanding. In the cultural case, it is not a matter of a lack of language or the length of stay in the resettlement country. Cultural misunderstandings do not stop and continue one after the other, which I call "the chain of misunderstandings." For clarification, below I am listing some examples of cultural misunderstanding from my research as well as my experiences.

Example 1

One sunny day in the Renkeby area of Stockholm, a strawberry seller was visited by a nice old Swedish lady. She looks at the strawberries and says:

"What nice, and fresh strawberries."

"Yes, yes my friend they are very good and cheap too."

"How much is the cost per box?"

"Cheap, very cheap, 15 Swedish cron."

"Oh yes, very cheap."

She takes out her wallet. The strawberry seller becomes very happy because he thinks the lady thinks his strawberries are both fresh and cheap so she will buy a few boxes.

She then asks whether the strawberries are Swedish (meaning, that they come from Sweden). Swedish strawberries are usually very good quality.

However, according to the perception of the strawberry seller, who is from Lebanon, everything comes from abroad, especially electrical goods, which are much better quality when foreign-made. Unknowingly, he answers: “No, they are from abroad.” (**first misunderstanding**).

She puts her wallet back in her pocket, saying, “thanks, I don’t want foreign strawberries and walks away.”

The strawberry seller becomes both embarrassed and disappointed by the woman’s actions. He says: “Come, come my friend I have a question.”

Go ahead, the lady replies. Then his question leads to the **second misunderstanding**. He asks the lady: “Do you want to eat the strawberries or do you want to talk to them?”

The third misunderstanding takes place when the lady replies: “No, here in Sweden we don’t talk with strawberries.” She thinks that maybe in Lebanon people talk with strawberries.

Further examples that I never forget include the following: When I came to Sweden after ten months in a refugee camp, I had to move to a city because the refugee camp was only a temporary place to stay. I chose a town called Eskilstuna, which is one hundred kilometers from Stockholm. I got a small apartment in an area where only Swedish families lived. I could speak English and a little Swedish. After five months of my stay in the area I experienced two cultural misunderstandings. At the time, I was shocked by these incidents, but now I understand they were pure misunderstanding, not anything else.

Example 2

One day I met my neighbor outside the main hall of the house. He was a man of forty to forty-five years of age. He asked me my name and where I was from. It was very gratifying that after five months a neighbor came to talk to me. At first, we spoke in Swedish, but he noticed that my Swedish was not enough to go further, so he asked if I could speak English.

As I can speak English better than Swedish, we continued our discussion in English. I wanted to take the opportunity to explain my background and the problems I went through in my home country. This was during the 1980s when ordinary people knew nothing about the oppression that Kurds faced in Iraq, Iran, Turkey, and Syria, and they had no information about the Kurds’ struggle for their rights. I told him how I was imprisoned both in Iran and Iraq and what the situation was like in prison and so on. I noticed his attitude towards me changed; without listening to my story, he said

“goodbye, I have to go.” I was so affected by it that I couldn’t move for a few minutes. What did I do that was not acceptable for him? Had I acted wrongly with him? Why did he act like that? Later I discovered that in Sweden only those who commit crimes are put in prison, and he thought I was a criminal. After that he never meet me and when he saw me wanted to avoid talking to me.

Example 3

After about one year staying in an area of Eskilstuna, one sunny day I sat down on a park bench in front of the house and enjoyed the warmth of the sun, which we rarely have in Sweden. People in Sweden are usually very quiet and rarely talk, but when the sun shines they have a special desire to speak. A man who was sitting in the yard in front of the house approached me and asked me if he could sit next to me on the park bench. He asked me if I could speak Swedish?

“Yes, I can, but not so well if you speak slowly and clearly its OK.”

“Where are you from?”

“I am Kurdish from Iran.”

“Ireland?”

“No Iran.”

“Do you mean Persian?”

“No, no, I’m Kurdish, I’m not Persian.”

“I mean Persian or from Iran as you mentioned.”

“Yes, yes, that’s right,” I replied.

“Are you enjoying yourself?”

“Yes, Sweden is a beautiful country but some things are very strange.”

“What is it that looks strange to you?”

“I lived here in the area for more than a year but I don’t know any of my neighbors. In my home country in such area, almost everyone knows each other and greets each other.”

He replied with a slight smile and said: “Do you see that girl with a flower in her hand?”

“Where?”

“Over there, the one with red clothes and a red flower in her hand?”

“Yes, yes, during the time I lived here she was the only one who has ever visited me.”

“It’s only her that everyone knows, that’s why she’s not feeling well and says ‘Hi’ to everyone and knocks on doors and visits people without informing them in advance.”

I was shocked by this and in silence said to myself: Yes, they think so, it may be rooted in culture differences or “culture clash,” which is a term

used to describe situations when different cultures meet and interact. It can lead to misunderstandings, conflicts or tensions. These differences may include values, behaviors, traditions and norms that may be different between different cultures. Being aware of and open to other cultures can help manage and reduce cultural clashes and promote a more respectful and better understood existence.

Environmental differences

Flying from a small village in Asia or Africa to a high-tech, developed country sometimes feels like a psychological shock for immigrants. By flying for five hours, an immigrant has jumped a period of more than fifty years of changing living standards. Going from a society where the standard of living still has not passed traditional tribalism and feudalism to a high-tech society in the beginning creates confusion for immigrants, and sometimes it may not be acceptable for some of the arrived immigrants. The immigrant's adaptation to the new environment, both physically and mentally, is a process that affects the immigrant's life in the resettlement country. The human relationship to the new environment is an important topic to explore. Human mental adaptation to the new environment is a fascinating and multifaceted process. Differences in language, culture, and values are factors that affect the adaptation process; how large these differences are prolongs the adaptation process to the new environment. Human adaptation to the new environment is a complex and dynamic process. It requires a holistic understanding of both physical and mental aspects to shape a sustainable and rewarding future for humanity.

Environment and psychosocial and biological aspects

Environmental factors include all external circumstances that affect an individual, such as the physical environment (such as climate and nature), the social environment (such as family, friends, and community), as well as cultural and economic conditions.

These factors can affect people's development, health, and lifestyle. On the other hand, psychological factors refer to internal aspects of an individual, such as personality, cognitive abilities, emotions, and mental health. These factors influence how we interpret and react to various environmental impacts.

It is important to understand how both environmental and psychological factors interact, as they can affect everything from individual well-being and performance to how people interact with each other and adapt to different life situations. Studies in psychology and sociology have explored the interplay between these factors to increase understanding of human