



Mental health of young migrants in Ireland- an analysis of the 'Growing up in Ireland' cohort study

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Outline

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Youth Mental Health

- Peak onset for mental ill-health occurs during the ***adolescent and early adult period***.
- Mental ill health as the ***leading cause of disability*** for 10-24 year old persons worldwide.
- ***1 in 3*** Irish adolescents will have experienced some form of mental health disorder by age 13 (*Cannon et al, 2013*).
- Numerous risk factors identified including familial conflict and adverse learning environment.



Migration and Mental Health

- Mental health disorders may increase when exposed to stressful circumstances.
- Process of migration may result in ***'exposing migrants to social stress and increased risk of mental disorders'*** (WHO, 2001).
- Rise in the absolute number of child migrants in recent years.
- 15% rise in immigrants to Ireland in year leading up to April 2016.



Conceptual Framework

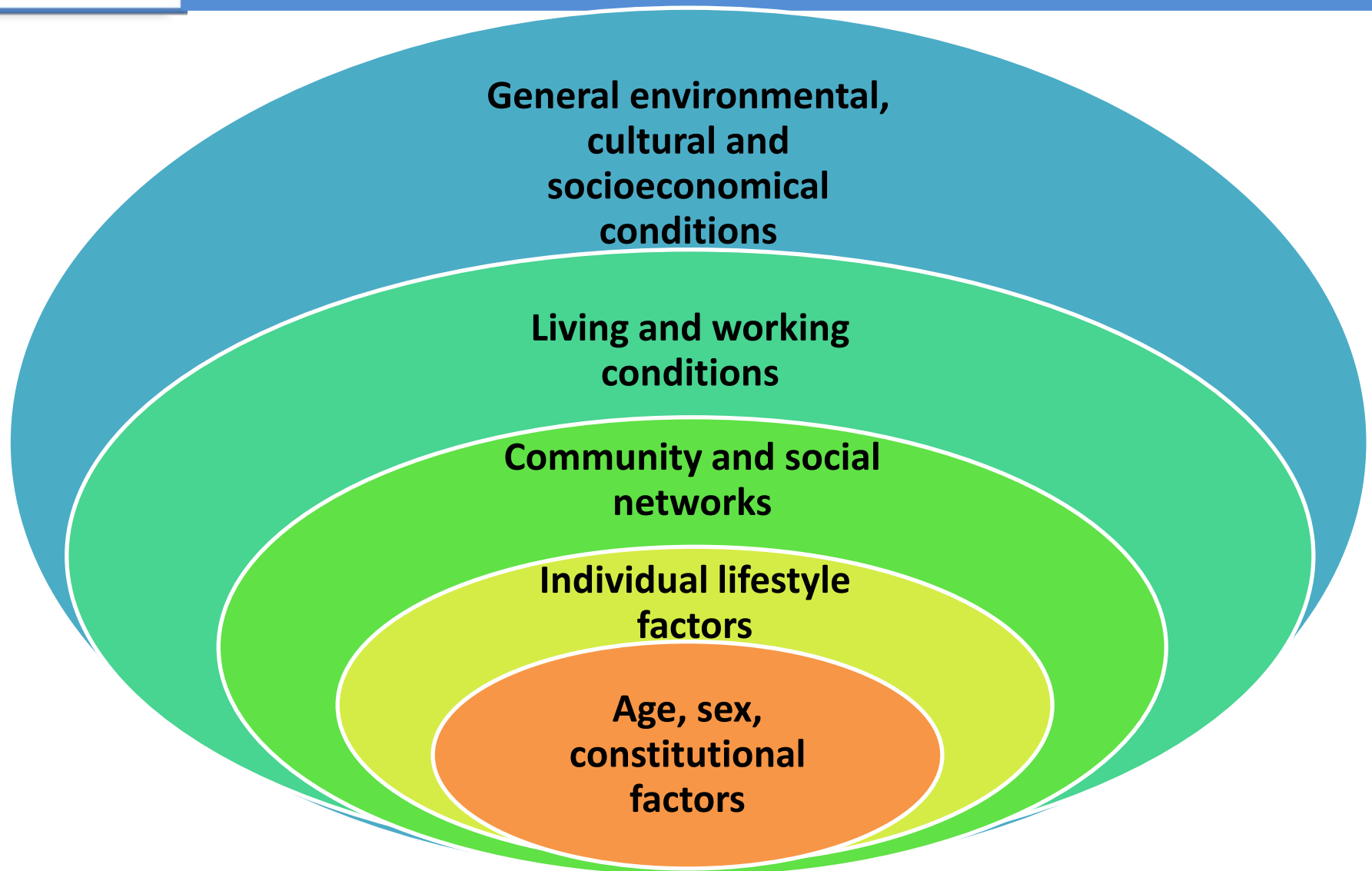


Figure 1: *Model of health determinants (based on Dahlgren and Whitehead's 1991 model)*

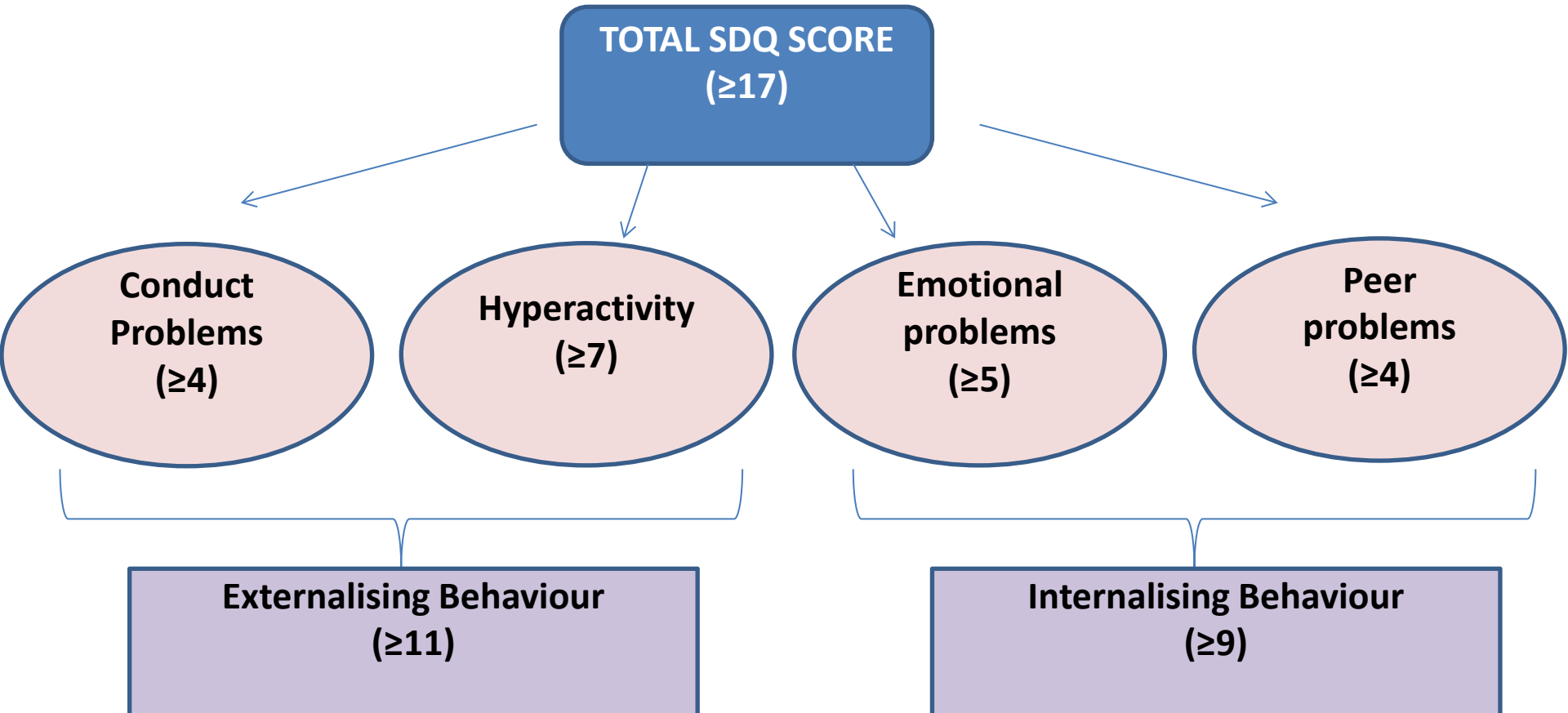
Aims of the study

This study aimed to investigate:

- 1) Whether there is greater psychological distress among young migrants than native Irish adolescents.
- 2) The types of mental health difficulties experienced by migrant youth in comparison to children who are Irish citizens.
- 3) Whether the link between having a migrant background and the likelihood of developing mental health problems changes over time.
- 4) Whether the experience of stressful life events impacts on the association between migrant status and psychological distress.
- 5) Whether there is a greater number of stressful life events experienced by migrant children compared to non-migrant.

Measure:

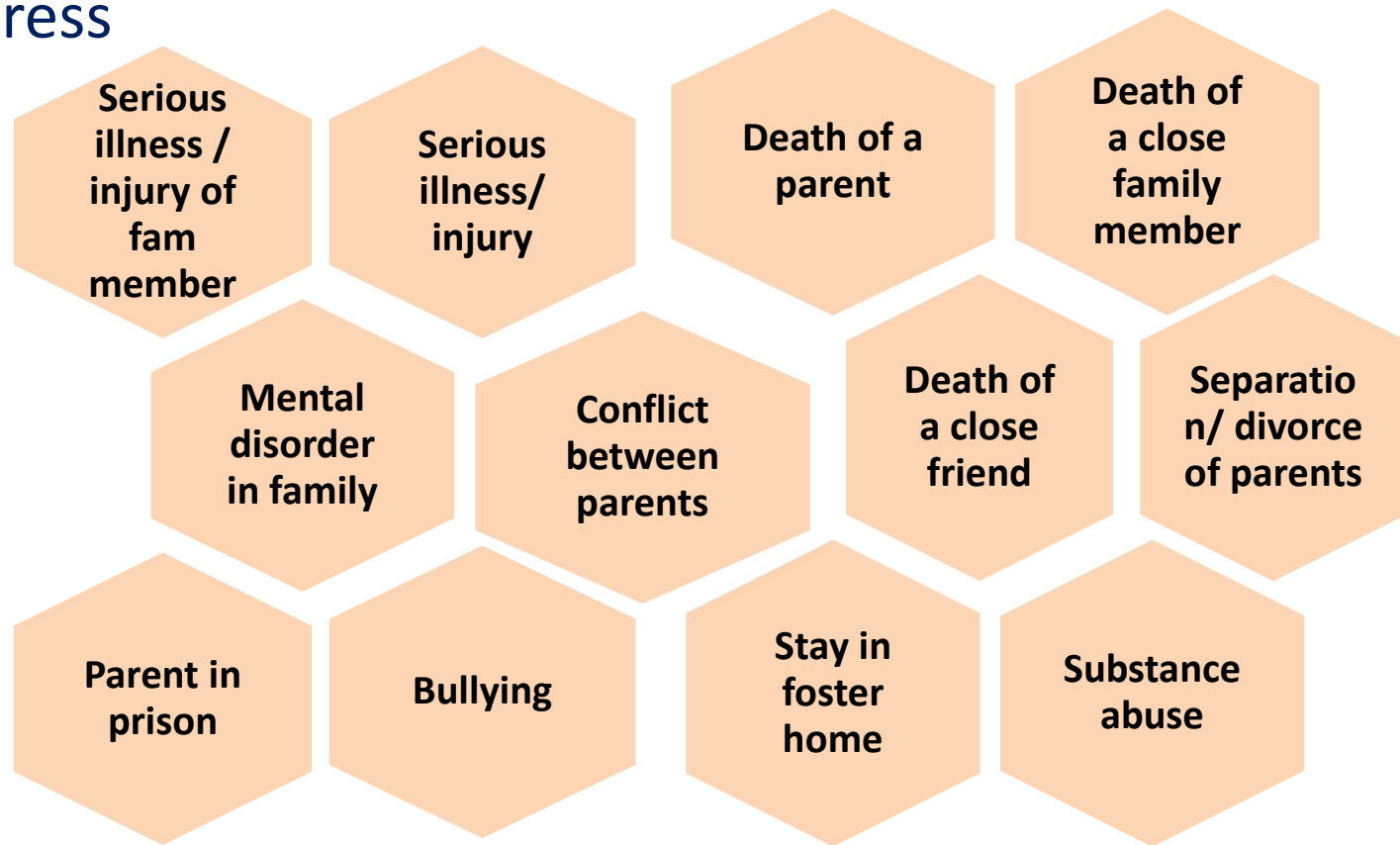
- SDQ scores based on PCG questionnaires



Methods

Exposure

- Numeric variable counting total number of stressful life events experienced by age 9 yrs
- Cumulative stress
- ≥ 3 stressors





Methods

Potential confounding factors:

- **SES * (measured by maternal education levels)**
- Gender
- Parental marital status

Statistical Analysis:

- SPSS Statistics 22 was used for all statistical analyses
- Chi-squared, parametric t-tests, logistic regression

- **Demographics:**

- Aged 9 yrs: **8,568 children**

Native Irish (n = 8,110)

Migrants (n = 458)

- No significant difference in gender or parental marital status of migrant vs. Irish children.
- Mean level of maternal education **significantly higher** ($p < 0.01$) in migrant children ($\bar{x} = 3.71$, SD: 1.38) than in native Irish ($\bar{x} = 3.17$, SD: 1.25).
- 90% follow-up rate at age 13 yrs.



Migrancy Status and SDQ Scores, 9 yrs

SDQ Subscale	Total abnormal N (%)	Migrant abnormal N (%)	Irish abnormal N (%)	Abnormal SDQ OR (95% CI) *	P- value
Total Score	652 (7.2)	32 (7.2)	620 (7.6)	1.12 (0.77-1.64)	0.54
Emotional	1200 (14.0)	54 (12.2)	1146 (14.1)	0.98 (0.74-1.33)	0.94
Conduct	839 (9.8)	30 (6.8)	809 (10.0)	0.77 (0.52-1.13)	0.18
Hyperactivity	1017 (11.9)	61 (13.8)	956 (11.8)	1.35 (1.02-1.79)	0.03
Peer Problems	738 (8.6)	39 (8.8)	699 (8.6)	1.15 (0.82-1.62)	0.41

- A significantly greater proportion of migrant children endorsed abnormal levels of hyperactivity



Migrancy Status and Externalising/Internalising Behaviours

Behaviour	Migrancy Status	Abnormal Score N (%)	Total Pop Abnormal Score N (%)	Abnormal PCG SDQ OR (95% CI)
Externalising	Irish	563 (6.9)	597 (7.0)	1.05 (0.72-1.52) p= 0.24
	Migrant	32 (7.2)		
Internalising	Irish	263 (3.2)	277 (3.2)	0.83 (0.46-1.50) p= 0.98
	Migrant	12 (2.7)		

- Differences associated with migrancy status and abnormal externalising / internalising behaviours were **non-significant** following adjustment for SES



Early Life Stressors

No. of Stressors	Total N (%)	Migrant N (%)	Irish N (%)	Odds Ratio citizenship (CI)
≥3	4763 (55.6)	200 (45.2)	4563 (56.2)	0.64 (0.53-0.78) p< .01

- Significantly higher ($p= 0.04$) mean cumulative stress in Irish citizens ($\bar{x} = 2.84$) than migrant children ($\bar{x} = 2.71$).
- Despite increased no. of stressors Irish children experience, no sig. difference in abnormal SDQ scores noted*.
- ≥3 stressors → no sig. difference ($p=0.40$) in proportion with abnormal SDQ scores between Irish/migrants.



Individual Early Life Stressors

Stressors	Total N (%)	Migrant N (%)	Irish N (%)	Odds Ratio citizenship (95% CI)			
				Unadjusted	P-value	Adjusted*	P-value
Death of a parent	214 (2.5)	12 (2.7)	202 (2.5)	1.09 (0.61-1.97)	0.77	1.34 (0.74-2.45)	0.34
Death of a close family member	3609 (42.2)	123 (27.8)	3486 (42.9)	0.51 (0.41-0.63)	<0.01	0.53 (0.43-0.66)	<0.01
Death of a close friend	516 (6.0)	17 (3.8)	499 (6.1)	0.61 (0.37-1.00)	0.05	0.68 (0.42-1.12)	0.13
Separation/Divorce of parents	1253 (14.6)	72 (16.3)	1181 (14.5)	1.14 (0.88-1.48)	0.31	1.19 (0.88-1.62)	0.26
Stay in foster home	115 (1.3)	8 (1.8)	107 (1.3)	1.38 (0.67-2.84)	0.39	1.63 (0.75-3.56)	0.22
Serious illness/injury	404 (4.7)	27 (6.1)	377 (4.6)	1.34 (0.89-2.00)	0.16	1.25 (0.82-1.89)	0.30



Individual Early Life Stressors

Stressors	Total N (%)	Migrant N (%)	Irish N (%)	Odds Ratio citizenship (95% CI)			
				Unadjusted	P-value	Adjusted*	P-value
Substance abuse	294 (3.4)	6 (1.4)	288 (3.5)	0.37 (0.17-0.84)	0.01	0.19 (0.07-0.51)	<0.01
Mental disorder in family	303 (3.5)	15 (3.4)	288 (3.5)	0.95 (0.56-1.62)	0.86	0.75 (0.42-1.35)	0.75
Conflict between parents	1047 (12.2)	64 (14.4)	983 (12.1)	1.23 (0.93-1.61)	0.14	1.08 (0.76-1.53)	0.67
Parent in prison	78 (0.9)	8 (1.8)	70 (0.9)	2.12 (1.01-4.43)	0.04	1.97 (0.84-4.65)	0.12
Bullying	2010 (23.5)	106 (24.0)	1904 (23.5)	0.97 (0.78-1.22)	0.81	0.95 (0.75-1.20)	0.67

- Significantly greater proportion of Irish children experienced **death of a close family member** and **substance abuse** in unadjusted and adjusted (for SES and all other stressors) models



Migrancy status and abnormal SDQ subscale/total scores, 13 yrs

SDQ Subscale	Total abnormal SDQ N (%)	Migrant abnormal N (%)	Irish abnormal N (%)	Abnormal SDQ OR* (95% CI)	P- value
Total Score	490 (6.5)	14 (3.9)	476 (6.6)	0.69 (0.40-1.19)	0.19
Emotional	876 (11.6)	26 (7.3)	850 (11.9)	0.65 (0.43-0.98)	0.04
Conduct	599 (8.0)	32 (9.0)	567 (7.9)	1.34 (0.92-1.95)	0.13
Hyperactivity	700 (9.3)	24 (6.7)	676 (9.4)	0.78 (0.51-1.19)	0.24
Peer Problems	587 (7.8)	32 (9.0)	555 (7.7)	1.22 (0.83-1.77)	0.31

- Following adjustment for SES, a **significantly greater proportion of Irish children** generated abnormal emotional SDQ scores (p= 0.04)

A significantly greater proportion of Irish citizens had experienced a greater number of early life stressors

- Are Irish children more susceptible to stress?
- Ireland's Adolescent Brain Development Study
 - Irish adolescents (15%) at higher risk of developing mental health disorders than equivalently aged counterparts in UK (11.2%) and USA (9.6%)
- Work/life balance of parents – adequate support network?

Migrant children did not appear to have higher levels of abnormal total SDQ scores

- 'Economic' migrants > conflict-driven migrants
- 2006 census → non-Irish citizens had higher levels of education
- Irish labour workforce more than doubled to almost 14% in decade leading up to 2006

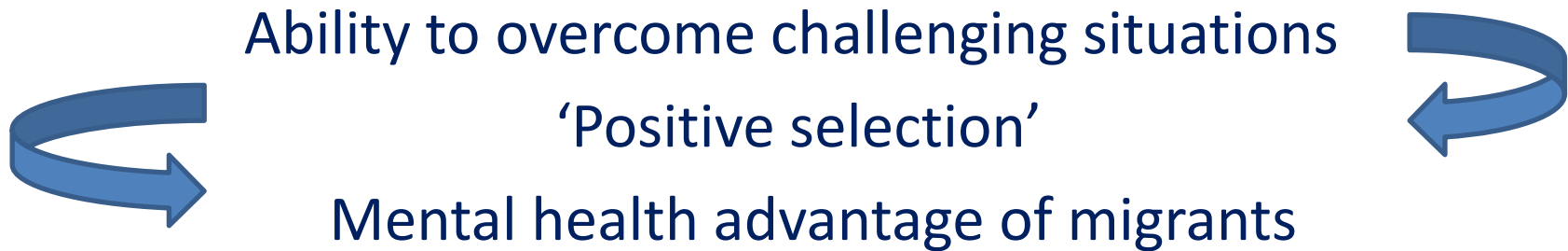
A significantly greater proportion of migrant children endorsed abnormal hyperactivity levels, aged 9 yrs.

- Difficulty in adjusting to new environment
- Need to seek acceptance from new peer groups?
- Variation in PCG's interpretation of children's behaviours
- Economic stresses → parental emotional distress → altered parenting style → behavioural problems (Conger et al., 2002)

A significantly greater proportion of native Irish children endorsed abnormal emotional levels, aged 13 yrs.

- Integration of immigrants culturally and economically-successful assimilation
- PCG perception of emotional problems and relationship with children

‘Healthy migrant effect’



‘Immigrant health paradox’

- Ability to evaluate current circumstances as higher quality than previously
- Strong migrant community support networks



Limitations

Restricted access to ethnicity of migrant children

Maternal education as a proxy measure for SES

Early life stressors only available at age 9 yrs

‘Citizenship’ = migrancy status

Psychological distress → SDQ scores recorded by PCG

Cultural variation in interpreting ‘abnormal functioning’

Social desirability bias

Individual perception of stressful events

✓ Large nationally-representative sample

✓ Longitudinal nature of study

✓ Numerous variables (exploration of potential confounders)

Conclusion

- This study indicated no significant difference in mental health outcomes between migrant and native Irish children.
- Future studies could further investigate the underlying reasons why Irish children are being exposed to an increased number of early life stressors.
- Further research in this area could aid policy makers in the development of effective policies which promote integration and provide accessible mental health services.



Recommendations for practice and future research

- Analysis and comparison with psychological development of the infant cohort.
- Further research could help identify the most influential factors in the relationship between migrant status and mental health and the underlying mechanisms of such.
- Mixed methods studies- increased understanding of young people's perceptions of 'stressors'?
- Ethnicity of migrant children and exploration of factors causing vulnerability/resilience within similar ethnic groups

Acknowledgements

- Professor Mary Cannon
- Dr Mary Clarke
- Colm Healy
- Dearbhail Ni Cathain

- RCSI
- UM