How do Pre-migration, Migration, and Post-migration Factors Influence the Mental Health and Well-being of Syrian and Somali Unaccompanied Minors in Sweden During the Asylum-seeking Process? A Qualitative Exploration.

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1. Abstract

The on-going conflicts and hardships in various parts of the world, especially in the Middle East and regions like Syria and Somalia, have triggered a significant wave of migration towards Europe. A considerable fraction of these migrants comprises unaccompanied minors. This research study aims to explore how pre-migration, migration, and post-migration factors influence the mental health and well-being of Syrian and Somali unaccompanied minors in Sweden during the asylum-seeking process. The study is qualitative in nature, employing six in-depth semi-structured interviews as its primary data collection method. Using the frameworks of the Sense of Coherence theory and coping theory, the research delves into the challenges unaccompanied minors encounter during the asylum process and the subsequent impacts on their mental health. The findings suggest that the asylum-seeking process significantly impacts the mental health of unaccompanied minors, eliciting mental health issues such as depression, anxiety, and feelings of uncertainty and insecurity. These influences are not confined to mental well-being alone but also permeate other aspects of their lives. This study therefore highlights the necessity of acknowledging and addressing the complex link between the asylum-seeking process and mental health among unaccompanied minors.

Keywords: Former unaccompanied minors, pre-migration, migration, post-migration, asylum-seeking process, mental health, well-being, experience, Sweden.
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2. Introduction

Today, over 70 million people worldwide have been forced to leave their homes, with the number increasing daily (UNHCR, 2021). The protracted and brutal conflicts in Syria and Somalia have led to the most significant refugee movements since World War II. Refugees from these countries have sought safety and protection in neighbouring nations and elsewhere, hoping to find lasting solutions, justice, and democracy (Redden 2014).

The ongoing conflicts in the Middle East and other parts of the world have forced many people, including unaccompanied children, to migrate to Europe. The United Nations guidelines on the protection and care for refugee children indicate that children make up half of the refugee population (UNHCR, 2001). Consequently, the number of refugee children risking their lives on perilous journeys in search of a new life increases every year. According to UNHCR, half of the 59.5 million people who left their countries since the end of 2015 are under the age of 18.

Unaccompanied minors often face multiple social challenges and mental health issues resulting from stressful pre-migration experiences and the asylum-seeking process. In 2015, Sweden saw a significant influx of unaccompanied minors, with 35,369 applying for asylum, in contrast to 890 minors in 2019 (Seidl, 2018; Unicef, 2021). This study aims to explore the experiences of individuals from Syria and Somalia who sought asylum in Sweden as unaccompanied minors, and to examine how the asylum process impacted their mental health and well-being. To achieve this, the study will conduct interviews with six adults who previously experienced this process as unaccompanied minors.

The focus on former unaccompanied minors is due to the sensitivity of the topic for children currently undergoing the asylum process, particularly those without a legal guardian. To ensure ethical considerations are met, this study will interview adults who previously sought asylum or are currently seeking asylum. These former unaccompanied minors can provide valuable insights and experiences to help newcomers navigate the asylum process.
Syria and Somalia were chosen because they represent the largest share of unaccompanied minors in Sweden, and limited research has been conducted on these groups. In 2015, around 163,000 people applied for asylum in Sweden, with 51,338 originating from Syria and 5,465 from Somalia (Swedish Migration Agency). The study will explore the participants' perceptions of their mental health rather than conducting a medical or psychological assessment. The experiences of Somali and Syrian unaccompanied minors seeking asylum in Sweden will be investigated, as these groups represented the largest share of unaccompanied minors during the 2015 migration crisis (UNHCR 2015).

The Sense of Coherence theory and the Coping Theory has been selected as the most appropriate frameworks for understanding the experiences of unaccompanied minors during the asylum-seeking process. These theories were chosen for their specific relevance to this study: The Sense of Coherence theory can help explain how the asylum process and related experiences impact the mental health and well-being of unaccompanied minors, while the Coping Theory can shed light on the strategies these individuals employ to navigate their challenging circumstances.
2.1 Aim and research questions

Main Research Question: "How do pre-migration, migration, and post-migration experiences influence the mental health and well-being of former unaccompanied minors from Syria and Somalia who sought refugee status in Sweden?"

1. What were the pre-migration experiences of these minors in Syria and Somalia, and how did these experiences potentially influence their mental health and well-being during the asylum-seeking process in Sweden?

2. What specific challenges did these individuals face during the migration and post-migration stages, and how did these challenges impact their mental health and well-being?

3. What coping strategies did these individuals employ during the different stages (pre-migration, migration, and post-migration) to deal with the mental health challenges they faced?

2.2 Definitions

Asylum-seekers- A person who is in a country during a period seeking asylum until he/she gets acceptance or rejection regarding the residence permit (Migrationsverket, 2015b).

Unaccompanied refugee children- A person who is under the age of eighteen, who is separated from both parents and is not, being cared for by an adult who by law or custom has a responsibility to do so (UNHCR, 1994).

Mental health- according to the Word Health Organization (WHO), mental health is "a state of psychological well-being in which the individual realises his or her own abilities, and can cope with the normal stresses of life (WHO, 2004). Good mental health is characterized by a sense of balance and well-being, the ability to manage one's emotions and behaviours, and the ability to form and maintain positive
relationships with others. Poor mental health, on the other hand, can manifest as various mental health conditions; changes in sleeping patterns are signs that an individual’s mental health is shifting (Hillsde, 2019). Anxiety, depression, bipolar disorder, and schizophrenia, among others are symptoms that indicate a decline in mental health (Ibid).
3. Background

This chapter provides a historical overview of migration in Sweden, focusing on unaccompanied minors, who are the central topic of this thesis. It also presents background information on the conflicts in Somalia and Syria, which have triggered significant refugee and migration flows, particularly among unaccompanied minors. The chapter further explores the impact of these migration experiences on the mental health of these young individuals.

3.1 Unaccompanied minors in Sweden

Sweden's experience with unaccompanied minors is particularly significant due to the country's long history of receiving such individuals and the on-going high rates of applications for asylum from this group. This section delves into the specifics of this phenomenon. Over the years, Europe has seen a significant influx of unaccompanied minors seeking asylum. Sweden has consistently been among the countries receiving the highest number of these applications (Eurostat 2015, cited in Celikakoy and Wadensjö 2017). Unaccompanied minors are defined as individuals under eighteen who arrive in a recipient country, in this case, Sweden, without a guardian or parents (Migrationsverket, 2015). Sweden has ratified the UN Convention on the Rights of the Child (1989), which outlines the rights of all children, regardless of their citizenship or residency status (Migrationsverket, 2021).

Sweden has a long history of receiving unaccompanied minors, including well-known groups such as Jewish children from Germany during the 1930s, Finnish children during World War II (Eriksson 2013), children from Hungary during the 1956 crisis (Hessle, 2009), and children from the Middle East during the 1970s (Angel and Hjern, 2004). In the 1990s, unaccompanied asylum-seeking children from Somalia constituted the largest group in Sweden, and this remains one of the largest groups to date (Swedish Migration Agency (SMA) 2017a, 2017b). In the autumn 2015, a significant shift occurred for thousands of people seeking to rebuild their lives in Sweden. It is estimated that around 65.3 million people were on the move in 2015, more than ever before (UNHCR, 2018). According to the Swedish Migration Board, approximately 163,000 individuals applied for asylum in Sweden in 2015, including
35,000 unaccompanied minors. The main countries of origin were Somalia, Syria, Afghanistan, Iraq, and Ethiopia. A total of 32,806 registered minors were aged between 13 and 17, while 2,563 were between 0 and 13 years old (Migrationsverket, 2016a). In that year, Syria had the second-largest share of unaccompanied minors applying for asylum in Sweden, with 3,800 applicants (Eurostat, 2016). While unaccompanied minors from Somalia were not the largest group in 2015, they contributed to the increased migration flows, with 2,058 unaccompanied minors seeking asylum that year (Migrationsverket, 2016). Ultimately, Sweden's history of welcoming unaccompanied minors and the recent upsurge in applications, particularly in 2015, signifies the country's continuing role as a refuge for these vulnerable individuals. This history also emphasizes the urgency and scale of the challenge faced by Sweden, as it must address the specific needs of unaccompanied minors from a diverse array of conflict-ridden regions, including Syria and Somalia. These insights further solidify the importance of this research in understanding the experiences of these minors and the ways in which different stages of their journey might impact their mental health and well-being.

3.2 Syria

Syria is one of the countries from which many unaccompanied minors originate. It is estimated that Syrians were the second-largest group of asylum seekers in Sweden in 2015, with 3,800 applicants (Eurostat, 2016). The Syrian civil war, now in its tenth year, began as part of the Arab Spring protests that swept through the region in 2011 (IDMC, 2020). Protests against President Bashar al-Assad's rule quickly escalated into an armed conflict, resulting in the displacement of more than half of the country's pre-war population (ibid.). The conflict in Syria has resulted in one of the largest mass movements since World War II. Approximately 6.2 million people, including 2.5 million children, are internally displaced within Syria, constituting the world's largest internally displaced population (UNHCR, 2021). Syria was once a country of immigration for displaced refugees, such as Palestinians; however, war and violence have played a central role in increasing migration and displacement rates within the country (ibid.). Around one million people have fled to Europe and applied for asylum, with Sweden and Germany receiving the highest number of applications (UNHCR, 2021). In conclusion, the profound and on-going crisis in Syria has driven
many, including unaccompanied minors, to seek asylum in countries like Sweden. The experiences these minors face before, during, and after migration underscore the significant influence their journey can have on their mental health. Their narratives will provide valuable insights into how the asylum-seeking process can impact mental well-being.

3.3 Somalia

Somalia has also been a significant source of unaccompanied minors. Over the past 26 years, the country has often served as a proxy battleground for international actors and ideologies, warlords and clans, and Islamist extremism (Ibrahim 2013). Conflict, poverty, natural disasters, and the absence of a centralized political system have all contributed to on-going displacement in Somalia (IDMC, 2021). The first significant refugee displacement began in 1991 due to the collapse of President Siad Barre's regime (Fagioli-Ndlova, 2015, p. 17). Since then, Somali refugees and internally displaced persons have remained the most consistently protracted displaced population in the Horn of Africa (ibid.).

Most conflict displacement in Somalia is linked to the activities of the Islamist militant group Al-Shabaab. As a result, a large number of Somali immigrants arrived in Sweden in the early 1990s, following the outbreak of civil war (ibid.). In 2011, the Swedish Statistics Agency reported that approximately 40,200 people of Somali origin resided in Sweden (SCB: 2013). Somalia experienced a 25% increase in international displacement with 602,700 new displacements in 2018 (UNHCR, 2018). In 2019, conflict and violence triggered 188,000 new displacements, primarily in the southeast, where Al-Shabaab maintains control. That year, more than 264,000 IDPs were evicted, making forced migration one of the main causes of secondary displacement in Somalia (IDMC, 2021). In total, Somalia has over 2.6 million displaced people, the world's fourth-largest IDP population (ibid.). Armed conflict and food insecurity are the primary drivers of large-scale displacement in Somalia (UNHCR, 2018). To sum up, the prolonged instability in Somalia has triggered widespread displacement, making Somalia a significant source of unaccompanied minors seeking asylum in Sweden. Understanding the experiences of these minors
during their migration journey and how they navigate the asylum process is crucial. Their experiences highlight the pressing need for tailored and comprehensive support strategies for child migrants.

As long as conflicts and conditions such as war and poverty remain unresolved, children will continue to flee their countries in search of a better life. Their families may accompany some, while others set out on this perilous journey alone. Both Somalia and Syria have been marked by protracted war, insecurity, and an absence of robust legal justice systems. This environment exposes children to a constant state of danger; forcing many to seek refuge elsewhere. These children, fleeing war zones, violence, and persecution, often risk their lives crossing the Mediterranean Sea, taking perilous routes to find safety and a promising future in Europe (UNICEF, 2021). Such direct experiences of trauma significantly increase their risk of developing mental health problems, highlighting the urgent need for effective support and intervention strategies in their host countries.

In order to design these strategies, it is imperative to understand the experiences of unaccompanied minors who have migrated from Syria and Somalia to Sweden. Their journey to safety, fraught with traumatic experiences, can have a substantial impact on their mental health. Research on the mental health of unaccompanied minors typically examines three aspects: (1) pre-migration factors such as trauma and torture; (2) experiences during the migration, including dangerous journey conditions and lengthy asylum processes; and (3) post-migration elements such as social determinants and experiences of discrimination in their new home.

A comprehensive source of data on this topic is the report by the Delmi Delegation, 'How traumatic experiences of war affect refugees’ mental health and to what extent experience of trauma leads to post-traumatic stress disorder’ (Hall & Kahn, 2020). The report suggests that individuals exposed to war are often afflicted with post-traumatic stress disorder (PTSD). Furthermore, it indicates that the trauma and hardships endured during migration and conflicts can create trust issues towards others.
In conclusion, migration is a complex social process that exposes children and families to a myriad of stressors and social factors that can lead to mental health issues such as depression, trauma, and PTSD. These experiences underscore the adverse effects of pre-migration, migration, and post-migration experiences on the well-being of migrant children. A thorough understanding of the historical context and present issues surrounding the migration of unaccompanied minors from Syria and Somalia to Sweden is key to addressing their experiences and challenges effectively.
4. Literature review

The literature review provides an overview of relevant research that can place the research questions and findings within a greater tenet of scholarly work. It also shows the different research that has been conducted on the issue of unaccompanied minors' mental health. Most research focuses on the implications, assessment and treatment of mental health problems among unaccompanied minors (Bean, Eurelings-Bontekoe, Mooijaart & Spinhoven, 2006; Derluyn, Mels & Broekaert, 2009; Kohil & Mather, 2003). Previous studies in the field of unaccompanied minors' mental health and its determinants are divided into three different categories: (1) those that focus on the health conditions that can be related to pre-migration factors, such as trauma and torture; (2) those that study factors during the migration itself, for example, dangerous conditions during the journey and the long asylum process; and (3) those that examine post-migration factors, such as social determinants and experience of discrimination in the new country.

Castles, De Haas, and Miller (2013) posited that migration, far from being a simple geographic movement, has profound implications on every facet of an individual's social existence. A complex web of ‘internal’ dynamics, shaping the individuals’ experiences and perceptions, drives this process. Migration is seen not as an isolated event, but rather as a response to a myriad of interconnected changes spanning economic, political, and social realms. This broad view of migration recognizes the intricate relationship between individuals and their societal context. When large-scale changes occur in a society, whether due to economic upheaval, political instability, or shifts in social norms, individuals may perceive migration as a viable or necessary strategy for coping with these changes.

The implications of migration extend far beyond physical displacement. Migrants often experience dramatic shifts in their social status, economic prospects, and cultural surroundings. These shifts can disrupt established patterns of behaviour and identity, leading to a profound reconfiguration of one's social existence. For instance, migrants may face the challenge of navigating unfamiliar social norms and expectations in their new surroundings, leading to a sense of disorientation and stress.
Further, migration can result in a significant change in the individual's social network, including potential loss of support systems. This can exacerbate feelings of isolation and loneliness, especially in cases where migrants are unable to form new social connections in their host communities due to language barriers, discrimination, or other obstacles.

Therefore, the experience of migration is a complex process that impacts various aspects of an individual's life. This broader understanding underscores the need for comprehensive support systems that address not just the physical, but also the social, psychological, and emotional aspects of migration (ibid.).

Earlier research on unaccompanied minors' experience of the asylum waiting process and the effects on mental health list numerous different causes for the phenomenon: some authors associate mental health with pre-migration experiences such as trauma, war and conflict. According to Fassin (2012), the focus on mental health in politics and research originated in a society concerned with the suffering of "foreigners" under the ideology of humanitarianism. Meaning that, due to war/conflict, poverty and natural disasters, research concerning mental health was brought to greater attention.

The world is continually becoming more globalized, which has made cross-national migration both more possible and more appealing. Such migration has as a consequence thus increased significantly during recent decades (Castles & Miller, 2003). Many professionals have studied and examined the relationship between the individual's sense of coherence, coping strategies, health, and one's quality of life (Shorey & Ng, 2019). Previous studies conducted by Charles Watters (2008) focused on unaccompanied minors seeking asylum and how these minors are treated when they seek to cross borders into the industrial parts of the world. Watters explained that unaccompanied minors find themselves in a state that is referred to as 'immigration control trajectories' and the 'welfare trajectories': these situations have an impact on shaping the psychological and emotional aspects of the unaccompanied children (Watters, 2008,p.3).
Moreover, Lazarus & Folkman (1984) explain that the way an individual perceives an event shapes the person's social reaction (ibid., p. 24). According to Lazarus and Folkman (1984), stress can be viewed as an organizing principle that exemplifies the importance of human adaptation experiences. Studies that examined stress appraisal looked at the connection between what an individual thought about and felt during a stressful experience or situation (Lazarus and Folkman 1984, p. 25). The findings showed that the individual faced uncertainty about whether and when harm would happen. Also, the experiment revealed that individuals with more prolonged brief expectation periods had a higher stress response level compared to the brief ones (Lazarus and Folkman 1984, p. 39). Stress appraisal is a concept that is studied to explain the different ways individuals manage stress. Risk factors that increase appraisals and situations that make individuals stress (ibid.).

The article by Emily, Stewart & Mercer on "Mental health of migrant children" explains the current understanding of how migration in terms of pre-migration experience, migration process, and post-migration impacts on children's mental health and well-being (Emily, Stewart & Mercer, 2009, p. 44). According to the study, migration is a complex social process that often subjects individuals and families to social factors and stressors, for instance, substantial barriers of culture and language differences that can result in mental health problems, such as types of migration process can relate to a different type of health risk (Emily, Stewart & Mercer, 2009, p. 45).

The study explains that the health experiences of migrating individuals and subgroups vary tremendously among transnational and international migration, legal and illegal migration, voluntary and involuntary migration (ibid.). The research focuses on the mental health of migrant children and the different migration processes that result in mental health problems. The study suggests that children are most vulnerable during the process of migration due to their lack of legal, socio economic and financial status. Also, separation from parents, family members and caregivers are factors that are associated with mental health issues (Emily, Stewart & Mercer, 2009, p. 46). The findings of the study are presented and discussed according to three aspects: pre-migration, migration process and
post-migration, and how each one has an impact on the mental health of the children. In the pre-migration stage, the findings depict that children who migrate from developing countries may face health issues, such as incomplete immunization. Moreover, unstable environments such as war and conflict, direct experience or witnessing of traumatic events, as well as substandard living conditions may also predispose them to mental health problems, including depression and post-traumatic stress disorder (PTSD) (Emily, Stewart & Mercer, 2009, p. 47).

Additionally, according to Sandalio (2018), because of the nature of the journey, asylum seekers are frequently subjected to potentially traumatic and post-migration stressors that may result in mental health problems. In various researches, asylum seekers reported experiencing multiple severe traumas during the journey. As a result, the difficulties of travelling and settling in a new country may worsen pre-existing mental health disorders. Also, asylum seekers frequently mention the pressure of feeling helpless and dependent. Long-term stay in reception centres—originally intended as emergency facilities not appropriate for people with mental health needs—along with protracted asylum proceedings have also contributed to increasing severe mental illnesses.

Sandalio comes to the conclusion that stressors upon arrival, potentially traumatic events at home or on the journey, and other factors all contribute to the development of mental health difficulties in this group. Following a comparative study by Robjant, Hassa and Katona (2009), detained asylum seekers have a significant prevalence of mental health issues. Anxiety, depression, post-traumatic stress disorder, self-harm, and suicidal thoughts were among the mental health conditions that were found. The detention procedure, the prolonged waiting period for an asylum decision, and the asylum interviews were all major contributing factors to these health issues.

Heptinstall, Sethna, and Taylar (2004) conducted a research experiment on the effects of pre-migration and post-migration experiences on the mental health of children. The results conveyed that pre-migration trauma such as violence or the death of a
family member correlates to a high level of PTSD score (Emily, Stewart & Mercer, 2009, p. 47). According to the findings of the study in the migration process period, it may be traumatic for children that migrate illegally or without an official status (ibid.). The study suggests that such children may experience physical violence and this may result in mental health problems, such as depression and self-inflicted harm. However, not much research has been conducted in this area (Emily, Stewart & Mercer, 2009, p.47-49). The impact of post-migration on the mental health of migrant children showed that migrant mental health depends on the reason for migration and socioeconomic status because it places immigrants in a different socioeconomic position in their new country (ibid.). Depression, anxiety, separation from the support system, inadequate language skills, and economic status may place migrant children in a vulnerable position. All of these factors may provide difficulties for the child to adapt to their new environment and result in distress (Emily, Stewart & Mercer, p. 47).

Overall, the article highlighted that migration is a difficult social process that subjects children and families to social factors and stressors that may result in mental health problems such as depression, trauma and PTSD. It also outlines the challenges of pre-migration, migration process and post-migration on migrant children's well-being. A high risk of certain mental health problems that migrant children could develop that may be victims of direct trauma experience (ibid.).

In line with the above, exposure to severe stressors and traumatic trials such as war, torture, violence, forced exile, persecution, deprivation and separation from family members have been found to increase the probability of mental health disorders among minors (Dyregrov, Gupta, Gjestad, & Mukanohele, 2000; Fazel et al., 2011; Heptinstall, Sethna, & Taylor, 2004).

After arrival, children face difficulties in the long immigration process to obtain status; the language and social change expose various stressors that may have an impact on their psychological well-being (ibid.). Post-traumatic stress disorder is the most common mental health issue that unaccompanied minors suffer from. A previous project that was conducted by Doctors without Borders in Sweden found
that 70% of the unaccompanied minors that are under the age of 18 who arrive to seek asylum in Sweden showed to experience post-traumatic syndrome disorder (Doctors without Borders, 2016-2017). Most studies have conveyed that unaccompanied minors are affected by the post-migration stress that results from their past experiences, such as war exposure or torture (Herz & Lalander, 2017). Moreover, post-migration struggles including the asylum-seeking process, uncertainties of refugee status, financial problems, frequent change in residence and social isolation have been recognized as possible risk factors that additionally exacerbate the previously difficult situation and pre-existing mental health problems of unaccompanied minors (Ajdukovic & Ajdukovic, 1993; Nielsen et al., 2008; Sinnerbrink, Silove, Field, Steel, & Manicavasagar, 1997). Research conducted in a youth psychotherapy centre illustrates that most unaccompanied minors experience stressful incidents that affect their mental health. These stressful events include involvements of traumatization and extreme violence, separation from family and the experience of being alone in a new country as important stresses that unaccompanied minors deal with (Seidel & James, 2019).

Furthermore, according to a 2016 study by the Sweden Red Cross, the rate of depression, anxiety, and poor health among newly resettled refugees and asylum seekers seeking protection in Sweden is at least three times greater than that of the general population. The Sweden Red Cross (2016) stated "Good mental health and general well-being are crucial for refugees to be in a position to find jobs and play a role in society”. Moreover, Up to 70% of asylum seekers felt they lacked sufficient social assistance, even in a nation with extensive experience and an advanced system of support for them. Another study conducted in Sweden by Nyame (2015) suggested that some of the effects of the asylum process on unaccompanied minors include that they fear making friendships because they are unsure of how their decision will turn out, and others consider suicide because they cannot bear to be sent back to their home countries and that many of the subjects mentioned that the asylum process can be very stressful on them and have an impact on their mental functioning (Ibid).

Different literature has shown that the asylum-seeking procedure does have a negative impact on the mental health or general well-being of unaccompanied
minors. Depression, anxiety, self-harm and suicidal thoughts are the primary mental problems associated with these asylum seekers that are brought on by the asylum-seeking process. Building upon the studies mentioned, my research seeks to explore the different stages of migration and their influences on the mental health and well-being of unaccompanied minors. Through a qualitative approach, this study aims to delve into the pre-migration, migration, and post-migration experiences of former unaccompanied minors from Syria and Somalia who sought refugee status in Sweden. It aims to explore how these various experiences have shaped their mental health and overall well-being.

Also, to be able to gain a more in-depth understanding of these individuals' lived experience and the specific challenges and needs that they face. My research delves into the factors contributing to their mental health issues and the coping strategies they use to manage these. In addition to helping to fill any gaps in the existing literature on this topic, my research could also have important implications for the development of policies and practice that aim to support the mental health and well-being of Syrian and Somali unaccompanied minors during the asylum-seeking process. By better understanding the specific challenges and needs of these individuals, it may be possible to identify strategies for improving their mental health and overall well-being during this often-difficult process.
5. Theoretical framework

In this chapter, the theoretical foundation of the study is presented, with a focus on the Sense of Coherence and the Coping Theory. These theories have been selected because they directly address how the asylum process impacts the mental health of unaccompanied adolescents and how they cope with their situations.

The Sense of Coherence Theory, put forth by Antonovsky (1987), and the Coping Theory, introduced by Lazarus and Folkman (1984), are pivotal for this study. They provide frameworks for understanding the multi-faceted experiences of unaccompanied minors navigating the asylum process.

The Sense of Coherence Theory provides crucial insights into the mental health of unaccompanied minors. It elucidates how their understanding of the asylum process – its comprehensibility, manageability, and meaningfulness – impacts their overall well-being in stressful circumstances. This theory offers groundwork for exploring the resilience of these young individuals during the asylum-seeking journey.

The Coping Theory delves into the strategies unaccompanied minors utilize to manage stressors during the asylum process. This theory provides a lens for identifying the problem-focused, emotion-focused, and maladaptive coping strategies employed by these individuals, thus broadening our understanding of their coping mechanisms.

These theories in combination allow us to explore how an individual's perception of their environment (as conceptualized by the Sense of Coherence Theory) and their response to stressful situations (as conceptualized by the Coping Theory) influence the mental health and resilience of unaccompanied minors in the asylum-seeking process.

The Sense of Coherence Theory and the Coping Theory were selected for their capacity to capture the complex dynamics of the asylum process and its effects on the mental health of unaccompanied adolescents. As such, our theoretical framework provides a thorough and nuanced understanding of the experiences of unaccompanied
minors during the asylum-seeking process, laying the groundwork for contextually appropriate and effective interventions.

5.1 Sense of Coherence Theory

Antonovsky (1987) introduced the Sense of Coherence (SOC) theory as a crucial aspect of an individual's ability to maintain their well-being under stress. SOC is a global orientation that expresses the extent to which a person feels confident that the stimuli deriving from their environment are structured, predictable, and explicable (comprehensibility); that resources are available to meet the demands posed by these stimuli (manageability); and that these demands are challenges that are worthy of investment and engagement (meaningfulness). The three components of SOC are:

1. Comprehensibility: The individual's ability to understand the situation and make sense of external stimuli.
2. Manageability: The individual's belief that they have the necessary resources to deal with the challenges they face.
3. Meaningfulness: The individual's perception that the demands placed upon them are worth the effort and emotional investment.

5.2 Coping Theory

Lazarus and Folkman (1984) developed the Coping Theory, which suggests that individuals employ various coping strategies to manage the demands and stresses they face in life. Coping is defined as cognitive and behavioural efforts to manage specific external and/or internal demands that are appraised as taxing or exceeding the resources of the person. Coping strategies can be grouped into three categories:

1. Problem-focused coping: These strategies involve addressing the source of the stress directly, such as seeking information, planning, or engaging in problem-solving.
2. Emotion-focused coping: These strategies aim to regulate the emotional responses to stress, such as seeking emotional support, engaging in self-care activities, or using humour.
3. Maladaptive coping: These strategies may temporarily relieve stress but ultimately exacerbate the issue, such as substance use, denial, or withdrawal from social interactions.

Building on Lazarus and Folkman's foundation, Carver (1997) expanded this categorization with a more detailed taxonomy of fourteen different coping styles. These styles offer a more nuanced understanding of the coping mechanisms individuals might employ when faced with stress. This taxonomy not only extends Lazarus and Folkman's original categories but also offers further insights into a variety of adaptive (such as acceptance, emotional support, humour, positive reframing, religion, active coping, instrumental support, planning) and maladaptive (like behavioural disengagement, denial, self-distraction, self-blaming, substance use, venting) strategies that individuals might resort to, particularly in challenging situations like the asylum-seeking process.

This more detailed understanding of coping strategies offers a more comprehensive approach for exploring and understanding the specific mechanisms unaccompanied minors use to cope with the stresses they encounter during the asylum-seeking process. Through the lens of these two complementary theoretical perspectives, it's possible to gain a more thorough comprehension of the coping mechanisms at play in this challenging context. This enhanced understanding provides a multidimensional perspective, fostering a more accurate and insightful understanding of unaccompanied minors' experiences, thereby equipping us to better support this vulnerable group in their challenging journey.

5.3 Analytical Framework and Data Analysis

The analytical framework for this study will integrate the Sense of Coherence and Coping Theories to analyse the data by examining the experiences of unaccompanied minors in the asylum-seeking process through the components of SOC and the coping strategies they employ. The data will be coded and organized based on the three components of the SOC theory (comprehensibility, manageability, and
meaningfulness) and the three coping strategy categories from Coping Theory (problem-focused, emotion-focused, and maladaptive coping).

In the data analysis, the study will use the SOC theory as a framework to examine how unaccompanied minors perceive and navigate the challenges associated with the asylum-seeking process. For example, when analysing the data for comprehensibility, the study will examine how unaccompanied minors understand the asylum-seeking process and identify the coping strategies they use to make sense of their situation. This may include problem-focused coping strategies, such as seeking information about the asylum process or engaging with legal procedures, or emotion-focused coping strategies, such as positive reframing or using humour to cope with the uncertainties.

Similarly, the analysis of manageability will explore how unaccompanied minors perceive their ability to deal with the challenges they face during the asylum-seeking process. The study will identify problem-focused and emotion-focused coping strategies that contribute to a sense of manageability, such as learning the local language or seeking emotional support.

Lastly, the analysis of meaningfulness will investigate how unaccompanied minors find emotional significance in the asylum-seeking process. The coping strategies employed to foster a sense of meaningfulness may include problem-focused strategies, such as setting goals or finding purpose in the process, or emotion-focused strategies, such as seeking spiritual or religious support.

By analysing the data through the lens of comprehensibility, manageability, and meaningfulness, the study aims to identify the factors that contribute to or hinder unaccompanied minors' mental health and well-being. Additionally, by employing the Coping Theory to explore the coping strategies utilized by unaccompanied minors in response to the stressors they encounter during the asylum-seeking process, the study will assess the impact of problem-focused, emotion-focused, and maladaptive coping strategies on the mental health and well-being of the unaccompanied minors.
The analytical framework will utilize the components of the SOC theory and the coping strategies from the Coping Theory to guide the interpretation of the findings. This approach will provide a comprehensive understanding of the coping mechanisms used by unaccompanied minors and their impact on mental health and well-being. By examining the factors influencing their experiences, the study can inform policy recommendations and interventions to support the mental health and well-being of unaccompanied minors seeking asylum.
6. Qualitative Research Approach

The qualitative approach to data, as well as interviews, is important to use when investigating a social phenomenon to understand why, for instance, attitudes change (Creswell, 2009, p.175). Bryan (2008) explains the qualitative approach as an inductive understanding between theory and research, whereby the former generates out of the latter (Ibid, p. 119). Using a qualitative approach allows for genuine ideas to be collected, interpreted, and analysed to find the research problem under study (Creswell, 2009, p. 175).

As noted by Kvale and Brinkman (2009), thematization is a significant factor in a research project: the "why" and the "what" of the research should be explained before the research of "how" (Kvale & Brinkman, 2009, p. 119). This allows the researcher to develop a theoretical knowledge of the phenomena in the study to establish new knowledge (Moses & Knutsen, 2012). It also helps the researcher to learn the meaning the participants themselves hold about the problem or issue under study (Creswell, 2009, p. 176). Thus, the qualitative research approach includes statements of real-life events within the real framework (Silverman, 2006, p. 117-119).

Merriam and Tisdell (2016) acknowledge that "the qualitative, interpretive, or naturalistic research paradigm defines methods and techniques most suitable for collecting and analysing data. Qualitative inquiry, which focuses on meaning in context, requires a data collection instrument that is sensitive to underlying meaning when gathering and interpreting data” (p. 2). Merriam and Tisdell continue by outlining how the foundation of qualitative research can be found in the social context of individuals and how they portray, assess, and interpret the world or situation that they exist within (2016, p. 6). Furthermore, according to Merriam and Tisdell, qualitative research allows for the researcher to make use of the human instrument, meaning that all data collected can be assessed and refined by the communication between the researcher and respondents (2016, p.16).

In light of the above discussion, the author conducted a qualitative study to better understand the perceptions and experiences of unaccompanied minors seeking asylum in Sweden and how the asylum process affected their mental health. Henning (2004)
explains that the researcher wants to discover what happened, how it happened, and why it happened in qualitative research. Therefore, the goal of this study was to provide rich data that is descriptive and exploratory in nature, tells the participant's story, and provides insight into their perception.

In this study, semi-structured interviews were selected and used as the primary method of collecting data from the participants. The main reason for using this interview technique is to try to get as close as possible to the psychological and social world of the unaccompanied minors and encourage them to tell their own story, without being entirely led by the interview questions (Smith & Osborn, 2003). Also, the researcher can examine, study, compile, and document the participant's responses using this research methodology. Using semi-structured interviews enables the researcher to present an opening of the interview process, allowing the researcher to comprehend and explore how interviewees construct and implement meaning in social life (May, 2011, p.135). The strength of using semi-structured interviews is that it increases the opportunities for interesting and important information to be brought up during the interview that otherwise would not be given because of the interviewer’s preconceptions (Olsson & Sörensen, 2007, p. 80). Another strength of using the qualitative approach is that it helps to understand personal motives and sensitive issues such as mental health from individual perspectives (Silverman, 2006, p. 215, 345).

Nevertheless, the accessibility of qualitative data through in-depth, semi-structured interviewing with unaccompanied minors in the asylum-seeking process can be difficult and time-consuming because of the sensitivity of the topic. Hence, potential bias by the participants can affect the neutrality and the data developing analysis (Silverman, 2006, p. 216). In order to address these concerns and align with the study's aim, the researcher will take several measures, including:

1. Building rapport with the participants before the interview, ensuring that they feel comfortable and secure while discussing their experiences.
2. Providing a clear explanation of the study's aim, purpose, and potential benefits for the participants and the broader unaccompanied minors' population.
3. Using open-ended questions that allow participants to express their experiences and perspectives freely, while also probing for further information when necessary.

4. Ensuring confidentiality and anonymity to create a safe space for participants to share their experiences without fear of repercussions or identification.

5. Employing reflexivity throughout the research process, continuously examining and reflecting on the researcher's positionality, potential biases, and influence on the data collection and analysis.

By incorporating these measures into the methodology, the study will adhere to the research aim and effectively explore the experiences and perceptions of unaccompanied minors during the asylum-seeking process, while also addressing potential challenges associated with the sensitivity of the topic and the qualitative research approach.

6.1 Validity and Reliability

When collecting data for a research study, it is important to thoroughly review the validity and reliability. Leung (2015, p. 326) claims that establishing validity involves checking the "appropriateness" of the methods, procedures, and data used in qualitative research. It concerns "whether the research question is valid for the desired outcome, the methodology of choice is appropriate for answering the research question, the design is appropriate for methodology, the sampling and data analysis are appropriate, and finally, the results and conclusion are valid for the same concept." The validity of this research study will be obtained through the identified research question. It does not, however, enable us to draw a conclusion about people's experience; instead, it places emphasis on how unaccompanied minors view and experience the asylum procedure, as well as how that process impacts their well-being and mental health. Thus, data was gathered through semi-structured interviews to strengthen the validity of the study. To check for any errors or omissions or to ensure proper presentation, every recorded interview was repeatedly compared to the text.

Reliability is the extent to which results are consistent over time and are an accurate representation of the total population under study (Bell & Waters, 2014, p.121). If the study’s findings can be verified using a similar methodology, reliability has been reached. This will lead to the research tool being regarded as reliable. According to
Joppe (2000) and Leung (2015), consistency is the key to reliability in qualitative research. To intensify the reliability of this study, it was necessary to listen to the recorded interviews and read the written materials several times before analysing the transcription. The reliability was further increased by asking the same interview questions to all the participants, as the aim was to obtain as equal and consistent answers as possible regarding the impact the asylum-seeking process had on unaccompanied minors' well-being. Also, the author chose to double-check the interviewees' answers by clarifying with the interviewer if they had understood the interview right. According to Kvale and Brinkmann (2009), it improves reliability and makes it easier to spot inconsistencies in participants' responses. Interviewers can check whether the same answer has been given by asking the same question repeatedly. However, it can be challenging to ensure reliability because the results might not be the same if the study were repeated later (Kvale and Brinkmann (2009).

6.2 Sampling and Sampling Techniques

Sampling is the process of choosing units, such as individuals or groups, from a population of interest so that, after analysing the sample, one can reasonably generalize the findings to the population from which the units were chosen (William, 2006). For the purpose of this study, purposive sampling was used to regulate participants according to the known characteristics (May, 2011, p. 99-102). Purposive sampling is a form of non-probability sampling, in which decisions concerning the individuals to be included in the sample are taken by the researcher, based upon a variety of criteria, which may include specialist knowledge on issues being researched or capacity and willingness to participate in the research (Carey, 2013:47). Moreover, Kumar (2005) stated that, purposive sampling can provide the researcher with the best information to achieve the objective of the study as it puts focus on the people directly affected. This type of research selection is important for the study because it provides a holistic picture of individuals that have experienced the phenomenon. The study's sample population consisted of six former unaccompanied migrant minors who had gone through the asylum process, with equal representation of males and females. The study tries to uncover the challenges of the asylum process and how it impacts their mental health and also coping strategies. The challenges uncovered in this study may
not be the same for all unaccompanied minors in different contexts, but they point to a general pattern of the problems confronting unaccompanied minors in other contexts or settings.

### 6.3 Ethical Consideration

Scholars have agreed that good ethical conduct is important for fruitful research. According to Babbie (2005), key concerns in successful ethical research are anonymity, confidentiality, informed consent, no damage to participants, and voluntary participation. Before conducting the interviews, the participants were informed about the research and were given a consent letter to sign. The participants scheduled the time and date they wanted to be interviewed. The author conducted six interviews, two of them as telephone interviews, and the other four through Zoom and FaceTime. The choice of the different interview setting was due to the participants' preference, and also due to the pandemic meeting was difficult. The researcher did not want any harm to come to the participant, such as the risk of getting COVID-19. With the Syrian participants, the interviews were conducted in English, and with the Somali participants in Somali. The interviews lasted approximately 40-65 minutes and were audio recorded, while paying attention to the ethical consideration of the research integrity and the code of conduct (Allea, 2017, Silverman, 2006: 120-122). The audio recording allows the researcher to check the expression of any statement that the researcher wants to quote (Bell & Waters, 2014, p. 184). The data gathering notes and recording during the interview were stored offline temporarily to later translate into English. In terms of talking about mental health and well-being, maintaining trust can be important for consistency and confidence of the conversation results (Silverman, 2006, p. 117). Additionally, when obtaining information during the data collection, it was important to listen carefully, interact and avoid stressing with the participant's point of view, and to uphold neutrality and ensure the continuity of the semi-structured interview (Silverman, 2006, p. 117-119).

The researcher chose to interview adults since this could be a sensitive topic for a child going through the asylum process, especially children without any legal guardian. Unaccompanied minors have been shown to be both vulnerable and resilient. While this research seeks to study those characteristics, the purpose was not
Thomas and Byform (2003), explain that ethical standards and guidelines should not be viewed as barriers, but as safeguards, "… ensuring good quality results while maintaining the safety and well-being of the young people" (p. 1402). Nevertheless, interviewing an adult is easier to get detailed and concrete answers to one's questions compared with children, who can be more careful when they do not feel comfortable. The selection process was the same for all of the participants, direct contact since the researcher knew them before and was aware of their situation. This could be seen as an ethical problem because the participants may have felt that they owed it to the researcher or had to do the interview since we knew each other from before, which then makes their consent less voluntary. The main purpose of this research study is to explore how pre-migration, migration, and post-migration experiences influence the mental health and well-being of former unaccompanied minors from Syria and Somalia who sought refugee status in Sweden. Accordingly, the participants' perspectives and experiences of their journey—before, during, and after migration—will be analysed through a constructivist lens. This approach enables us to delve into the meaningful real-life experiences of the participants, shedding light on the multifaceted reality of this phenomenon (Silverman, 2006, p. 215).

6.4 Procedure for the Interview

A data collection technique usually includes interviews or other methods of gathering data from participants (Creswell, 2013). In this study, semi-structured interviews were conducted to collect data from the participants. Semi-structured interviews are a combination of structured and unstructured interviews that allow participants to express their thoughts and feelings on the topic while keeping the discussion focused on the research question (Creswell, 2013). The interviews were designed to provide flexibility and allow the participants to provide in-depth information about their experiences.

The interviewed participants were previous unaccompanied minors aged 18-25, who have come as unaccompanied minors to Sweden and are now adults. Before the interview, the researcher prepared a set of open-ended questions that served as a guide during the interview process. These questions focused on the participants' experiences.
during the asylum-seeking process, the challenges they faced, their mental health, and their coping strategies. The questions were designed to be open-ended, allowing the participants to share their stories and experiences without any constraints. During the interview process, the researcher began by explaining the purpose of the study and assuring the participants of the confidentiality and anonymity of their responses. The participants were encouraged to speak openly and honestly about their experiences, and the researcher listened actively to ensure the participants felt heard and valued.

The interviews were recorded with the participants' consent to allow for accurate transcription and analysis of the data. Throughout the interview, the researcher took notes, asked follow-up questions, and sought clarification where necessary. The researcher also employed active listening skills, empathy, and non-judgmental attitudes to create a safe and comfortable environment for the participants to share their experiences.

The duration of the interviews varied with each participant, lasting between 40 to 65 minutes. This allowed enough time for the participants to fully share their experiences and for the researcher to ask follow-up questions and delve deeper into the topics discussed.

6.5 Data Analysis

Thematic analysis was used to analyse the data collected from the interviews. Thematic analysis is a flexible and useful research tool that can potentially provide a rich and detailed account of the data (Braun & Clarke, 2006). It involves identifying, analysing, and reporting patterns or themes within the data (Braun & Clarke, 2006). After transcribing the interviews, the researcher read through the transcripts several times to become familiar with the data. Highlighting significant phrases, sentences, or sections of the text that directly related to the research questions generated initial codes. Codes were then sorted into potential themes based on their similarities and differences. These themes were reviewed and refined to ensure they accurately represented the data. Once the final themes were established, they were analysed in
relation to the research question and the existing literature on unaccompanied minors, the asylum process, and mental health. The researcher maintained a reflexive approach throughout the data analysis process, being aware of personal biases and assumptions that could influence the interpretation of the data. The analysis aimed to provide a comprehensive understanding of the participants' experiences and perspectives, highlighting both the challenges they faced during the asylum process and the coping strategies they used to maintain their mental health and well-being.

6.6 Reflexivity

The decision to adopt a qualitative approach for this study was appropriate, as it allowed for a deeper understanding of the unaccompanied minors' experiences through their first-hand accounts. The verbal and nonverbal communication provided valuable insights into their perspectives, emotions, and the impact of their experiences on their mental health. However, it is important to note that a quantitative method could have provided more information on the prevalence of mental health problems in this population.

When researching subjects related to human behaviour, it is crucial for the researcher to be mindful of their approach (Kapp, 2006; May, 2011, p.151-152). Studying the mental health of unaccompanied minors can be a sensitive topic, so extra care was taken when formulating the interview questions. While qualitative interviews often involve some level of subjectivity, efforts were made to avoid sensitive questions that could have influenced the researcher's involvement in the study.

6.7 Limitations of the interviews

Several limitations were encountered during this research. First, there was a scarcity of relevant previous research on unaccompanied minors and the impact of the asylum-seeking process on their mental health. This made it difficult to build upon existing knowledge and develop a comprehensive understanding of the topic.
Second, recruiting former unaccompanied minors for interviews proved to be challenging. The COVID-19 pandemic has imposed restrictions on in-person meetings, which made it difficult to find and engage with potential participants. Additionally, scheduling interviews was occasionally problematic due to participants' work commitments and the need to reschedule.

These challenges affected the study's resources and limited the number of participants that could be interviewed. As a result, the study's findings may not be as robust as they could be with a larger sample size. However, the insights gained from the interviews still provide valuable information about the experiences of unaccompanied minors and their mental health during the asylum-seeking process.
7. Results and Analysis

This chapter reveals the findings of the research and provides a comprehensive analysis of these results. The outcomes are derived from the themes that emerged during the transcription of the interview data. These themes are intricately related and provide insights into the experiences and mental health of unaccompanied minors during the asylum-seeking process in Sweden.

The themes were identified through continuous comparison of all data collected during the coding, following the method proposed by Strauss and Corbin (1998). This method suggests that data analysis should offer an understanding of the relationships between variables at increasing levels of abstraction. Through this process, four significant subcategories emerged that provide valuable insights into the study:

1. The feeling of uncertainty and insecurity;
2. Mental health issues relating to asylum-seeking;
3. Challenges and barriers during the asylum-seeking process;
4. Participants' perspectives on the asylum-seeking process.

Each of these subcategories reveals distinctive properties and dimensions that enhance our understanding of the asylum process and its impact on the mental health and well-being of unaccompanied minors. These themes, as they relate to the social and mental health of unaccompanied minors, will be supported and exemplified by quotations from the participants.

Furthermore, to fully comprehend the interrelation of these themes and their implications, they will be discussed in the context of the Sense of Coherence Theory and the coping theory. By aligning the discussion with these theories, the study aims to provide a holistic understanding of the experiences of the unaccompanied minors throughout the asylum-seeking process.

In the following sections, each theme will be explored in detail, along with illustrative quotes from the participants, and an analysis drawing upon the theoretical frameworks. This structure allows us to trace the impacts of pre-migration, migration, and post-migration factors on the mental health and well-being of Syrian and Somali unaccompanied minors in Sweden.
The feeling of uncertainty and insecurity

The interviews with the former unaccompanied minors from Syria and Somalia revealed a shared theme of uncertainty and insecurity. Each narrative was unique, yet common threads were evident across the diverse stories.

One of the participants, a Somali minor (Participant A), explained the journey of coming to a new country. Their testimony revealed how the feelings of uncertainty and insecurity start from the moment of leaving the home country and amplify as they face the challenges of the asylum-seeking process:

“Firstly, the day you decide to come to a new country, the feeling of uncertainty begins...Secondly, if you are lucky and you make it to your destination country like me, your first initial feeling is uncertainty and confusion...Thirdly, starting your application for asylum-seeking in a different language makes you stress, because you do not understand the language so you become dependent on others to translate for you”.

This sentiment was also reflected in the narrative of a Syrian minor (Participant B), who shared a similar concern about the outcome of the asylum process: "You emigrated from your country of origin in pursuit of safety and a better life. When you move to a new country and seek asylum, your biggest concern is whether your case will be granted asylum or denied. Because you are unsure of the outcome, this causes you to feel worried and nervous."

Such narratives underscore the shared sense of uncertainty among these unaccompanied minors during the asylum-seeking process. These narratives, while unique in their details, jointly highlight how the process of seeking asylum can trigger feelings of insecurity, stress, and worry. These emotional experiences have clear implications for their well-being. By understanding the unique experiences of these unaccompanied minors through their narratives, we can better appreciate the shared challenges they face and how these challenges influence their mental health and well-being. Antonovsky's (1996) Sense of Coherence theory provides a framework for understanding how these unaccompanied minors navigate these challenges. The theory suggests that a sense of comprehensibility, manageability, and meaningfulness
can help individuals cope with stressors. In the context of the asylum-seeking process, the sense of meaningfulness appears to be particularly crucial, given the significant impact the outcome can have on the minors' sense of purpose and value. Exploring the individual elements of the Sense of Coherence theory in relation to the narratives provided by the participants allows us to connect their experiences with these theoretical concepts.

The first element, comprehensibility, is exemplified in Participant A's narrative. The participant highlighted the challenges of understanding the asylum-seeking process, especially when conducted in an unfamiliar language, which caused stress and dependency on others for translation. This struggle exemplifies a significant hurdle in their comprehensibility, as understanding the process and potential outcomes becomes a significant challenge.

The second element, manageability, is illustrated by the unaccompanied minors' experiences of navigating the asylum-seeking process in a new country. This often means facing a variety of challenges that test their manageability. These include learning a new language, adapting to a new culture, and waiting anxiously for the outcome of their asylum case.

Lastly, the narratives of participants, such as Participant B, highlight the importance of the third element, meaningfulness. Despite the hardships and uncertainties during the asylum-seeking process, their journey to a new country is driven by the hope for safety and a better life. This pursuit of a meaningful existence can significantly influence their well-being and capacity to cope with the stressors encountered during the asylum-seeking process.

In conclusion, Antonovsky's Sense of Coherence theory offers a valuable lens through which to understand the experiences of unaccompanied minors seeking asylum. By examining their narratives in light of comprehensibility, manageability, and meaningfulness, we can gain a deeper insight into the psychological impacts of the asylum-seeking process on their mental health and well-being.
Impact of 'Waiting' on Mental Health and Well-being

The narrative from the Syrian minor, Participant A, presents a candid depiction of the profound mental toll that the 'waiting' process, inherent in the asylum-seeking process, can have on unaccompanied minors.

Participant A’s personal account of their journey from Syria to Sweden illustrates the harsh realities that unaccompanied minors often grapple with, coupled with a pervasive uncertainty. They explain how the decision to leave Syria was steeped in fear and uncertainty:

“The day I made the decision to leave Syria, I knew the trip and the entire experience would be difficult because of all the stories you hear from other people who have done this before... In my thoughts, I knew there was a very slim possibility I would live and make it to Sweden. I was most concerned about not having my family with me and whether I would have enough money.”

This narrative illuminates the dread and fear of the unknown that are often intertwined with the perilous journey undertaken by such minors. The lack of family support and financial insecurity further intensify the challenges faced during the journey.

Upon reaching Sweden, a new form of stress emerges for Participant A – the uncertainty during the 'waiting' process of their asylum application:

“After coming to Sweden and submitting an asylum application... you are waiting for a decision which outcome will impact your future, you worry constantly every day. Most of the time, you start overthinking and panicking because you are afraid that the reason it is taking so long to hear back from someone may be because you have not been granted refuge.”

Here, Participant A vividly captures the anxiety that accompanies the 'waiting' period in the asylum-seeking process. The constant worry, overthinking, and fear reveal the heightened state of anxiety that this period provokes. The lack of control over the situation and the unknown timeframe further compound the stress, leading to a state of psychological distress.
In this narrative, Participant A effectively communicates the distressing impact of the 'waiting' process on their mental health and well-being. The constant worry, overthinking, and panic provide a glimpse into the heightened state of anxiety and stress experienced during this period of their asylum-seeking process.

Expanding upon the experiences of the unaccompanied minors, Interviewee B from Somalia paints a vivid picture of the mental and emotional turmoil they undergo while awaiting a decision on their asylum application. This participant spoke of the psychological strain they endure due to the unpredictability of their future: "The unpredictability of the future forces you to live in continuous anticipation, making time your biggest enemy. Your mind begins to play tricks on you because you are constantly in survival mode." It's clear that the state of constant uncertainty pushes them into survival mode, creating an atmosphere of tension and anxiety. They oscillate between feelings of gratitude for their current safety and profound frustration, culminating in a lack of motivation to engage in daily activities.

Interviewee B's reflections provide insight into the profound vulnerability they experience during the migration process. They attribute their fears and worries to a lack of familial support, uncertainty about their immigration status, and financial insecurity. It becomes evident that the waiting process, characterized by its inherent stress and uncertainty, induces a sense of helplessness.

The hardship of waiting for asylum is further emphasized by the participants' shared sentiment that being without legal status hinders their ability to engage in long-term planning and visioning for their future. This state of limbo often amplifies everyday anxieties, as the outcome of their cases hangs in balance. Research supports these personal accounts, showing that prolonged asylum procedures can have a detrimental effect on the well-being of asylum seekers, including unaccompanied minors. As noted by Li et al. (2016), extended asylum procedures correlate with higher rates of anxiety and depression in minors compared to those who experience shorter processing times.

Therefore, the testimonials shared by the participants, such as Interviewee B, shed light on the wide array of stressors they encounter that may negatively affect their
mental health. These include feelings of anxiety, worry, and the persistent uncertainty inherent in their immigration and asylum-seeking process.

Coping theory serves as a useful framework for examining the well-being of unaccompanied minors under the stresses of the asylum-seeking process. This theory deals with how individuals manage and respond to stress through cognitive and behavioral strategies. Two primary strategies are problem-focused coping and emotional-focused coping. Both strategies are employed in response to adversity or stressful situations (MacArthur and MacArthur, 1998).

The coping model, as proposed by Folkman and Lazarus (1980, 1985), underscores that individuals' perceptions and appraisal of stressful situations significantly influence their emotional responses and behaviours. It further highlights the importance of the context in which this stress is experienced, focusing on the interaction between personal and environmental factors that ultimately shape the coping outcome. In applying this model to the experiences of the unaccompanied minors in our study, the narratives resonate with a problem-focused coping approach. This approach is adaptive and beneficial when faced with changeable situations. However, if a situation remains unresolved, problem-focused coping can give rise to psychological distress (Lazarus, 1993). The severity of the stress response and the coping effectiveness can vary among individuals depending on their vulnerability. Studies suggest that individuals who are more vulnerable and exposed to stress are more prone to mental health problems (Ruddock, 2018; Darity 2008).

In the context of the unaccompanied minors seeking asylum in Sweden, their vulnerability is palpable. The stressors they face—long waiting periods for asylum decisions, absence of family, and societal expectations to shoulder adult responsibilities—all contribute to heightened vulnerability. Their narrative reveals a continuous state of worry and an overwhelming sense of a lack of control over their situation. Furthermore, the influence of the societal context cannot be understated. When a system fails to support an individual adequately, other systems are impacted too. The minors' overall well-being is negatively affected by the combination of the complex asylum procedures, a lack of familial and social support, challenging
environmental situations, and inadequate coping strategies. This situation sheds light on how crucial it is to address these factors to enhance the mental well-being of unaccompanied minors seeking asylum.

**Unaccompanied Minors' Perspectives on the Asylum-Seeking Process**

The significance of the societal context continues to be pertinent in this part of our study. It becomes pivotal to comprehend the thoughts and feelings of unaccompanied minors regarding the asylum application process and the period of waiting. The study underlines the crucial influence this period has on their mental health.

The participants expressed the strenuous nature of waiting for an asylum decision, a process that drastically limits their ability for long-term planning and forward thinking due to their uncertain legal status. Furthermore, the minors stressed that the asylum process itself is a significant source of stress, largely because they are unsure of their case outcomes.

The consistency in their responses underscored how negatively the waiting procedure affects them. Just as we saw previously, when one system does not provide adequate support to an individual, other interconnected systems suffer as well. Hence, the experiences shared by the unaccompanied minors illustrate how the combination of complex asylum procedures, lack of family and social support, challenging environmental conditions, and ineffective coping strategies all contribute to their overall mental well-being.

The participants consistently voiced the emotional stress of living in uncertainty. Participant A (Syrian) revealed, "I am always stressed because I don't know what will happen next... I have a hard time concentrating on anything and it feels like I am living in my own world alone." This encapsulates the sense of being adrift and alone, intensifying the difficulties of navigating the asylum process.

Echoing this sentiment, Participant B (Somalian) expressed feelings of despair and fear about potential case rejection: "I come to Sweden with so much hope but all of that is gone... I thought I would be safe here but if they reject my case then life has no meaning for me. I am always feeling uneasy..." This powerful testimony underscores
the emotional turbulence experienced by these minors as they traverse an uncertain path in a foreign land.

Further emphasizing the challenges, Participant C (Syrian) articulated the difficulties of being young and striving for a better future: "Life is full of challenges but it is hard to accept these difficulties when you are young...The most difficult part of the asylum process is that you feel stuck and your life is on hold, simply because you have no legal status. You start to become impatient and lose hope because everything you plan for seems to be far away."

When asked about the kind of difficulties that are hard to accept, Participant C (Syrian) responded: “The most challenging one is the sense of belonging to a society, you feel restricted to progress in the Swedish society because you do not have many opportunities compared to those that are granted asylum. The language, culture, and religion are different which means you have to invest time into learning everything so you can be part of the society.”

This illuminates another layer of difficulty encountered by these minors - the struggle to assimilate into a new culture while dealing with the enormous pressure and uncertainties of the asylum-seeking process. The challenge of integrating into a new society, learning a new language, and understanding new cultural and religious norms, all while facing legal and procedural uncertainties, contribute significantly to their overall mental stress and challenges in maintaining well-being.

The asylum-seeking process experienced by unaccompanied minors, as revealed in the responses shared, aligns with Bissell's (2007: p.282) conceptualization of waiting as 'the event-to come' or 'the not-yet.' This situation creates a suspenseful circumstance, a prolonged state of waiting, aiming to reach the end goal. This waiting process, coupled with the fear of asylum application outcomes, exacerbates the minors' psychological distress. They are left wondering whether they will be accepted or rejected and potentially returned to their home countries, causing an uncomfortable suspension between their past and present.
This situation can severely affect their well-being. Participant A's account that, “I am always stressed because I don't know what will happen next...” echoes this ongoing state of anxiety and distress. This chronic worry and uncertainty can lead to serious illness over time, particularly in minors who may lack the necessary coping strategies to manage such pressure. The collective responses of Participants A, B, and C underscore the significant stressors created by the waiting process within the asylum procedure.

According to Antonovksy's sense of coherence theory, the concepts of comprehensibility and manageability provide insight into the impact of the asylum process on these unaccompanied minors. Comprehensibility involves a person's ability to understand and make sense of a situation (Antonovsky, 1996). In this context, it pertains to the minors' ability to grasp the new language, culture, and societal norms they encounter in Sweden. As Participant C stated, “The language, culture and religion are different which means you have to invest time into learning everything so you can be part of the society,” revealing the challenging process of cultural adjustment. This adjustment can significantly impact their well-being, inducing stress and uncertainty.

Manageability, on the other hand, refers to a person's capacity to cope with and handle a situation effectively (Antonovsky, 1996). In the case of asylum-seeking minors, manageability is tested by their ability to deal with the asylum process's uncertainties and challenges. The minors' coping mechanisms are tested by uncertainties, particularly the pending outcome of their asylum claims, contributing to the overall stress and negative impacts on their mental health.

The sense of coherence theory has helped to comprehend how the minors' well-being was affected. For an individual to establish a strong sense of coherence (SOC), three components are crucial—adolescence, family ties, and community stability (Antonovsky and Sagy, 1989). However, unaccompanied asylum-seeking minors often have a weakened SOC due to several factors, including parental separation, originating from unstable communities, and uncertain futures in Sweden. A robust SOC is essential to protect against depression and anxiety (Collingwood, 2016), and the interviews revealed that these minors have a weakened SOC. Their inability to
comprehend, manages, and finds meaning in their life challenges signals a weakened SOC, potentially leading to mental health challenges.

**Mechanisms for Overcoming Challenges and Barriers**

A secondary objective of this research was to understand how unaccompanied adolescents seeking asylum navigate the difficulties inherent in the asylum procedure. It is crucial to emphasize that the methods and sources of assistance to surmount obstacles, as reported by the participants, varied significantly among individuals, reflecting the unique experiences and resilience of each adolescent.

These challenges span pre-migration stresses, the waiting period for asylum decisions, cultural adaptation issues, and mental health concerns. By comparing their past and present experiences, the former unaccompanied minors showcased either continuity or change in their attitudes towards the waiting period and mental health status. Given the variance in experiences, it is critical to underscore that there is no "one size fits all" coping strategy. Instead, each individual's coping methods are shaped by their unique circumstances and resilience capacities. The following are highlights from the interviews:

Three interviews, in particular, shed light on the variety of coping mechanisms employed by these adolescents, underlining the concept that there isn't a "one size fits all" strategy to deal with the complex experiences encountered during the asylum process.

Participant A, a Syrian adolescent, found solace in the company of friends and through various activities, which helped him to not only better understand the culture of his new home but also to distract himself from the ongoing stress of his asylum procedure. "It's hard to avoid you feeling complete because everyone around you is feeling the same stress. I usually go out with friends at least three to four times a week and do activities such as taking a walk, painting or the outside gym. They've lived in Sweden for a long time, so they know the city better than me. This helped me because I became more familiar with the city and picked up the language from them too. Also, spending time with my friends helps me escape my thoughts and the reality of my situation". 
Participant B, a Somali adolescent, adopted a different approach. The support from professionals and the chance to express his feelings became a significant coping strategy for him. "At the beginning of my journey, I used to hate to explain my feeling or share my life with anyone. This was because I did not trust anyone and I did not want anyone to feel sorry for me. But as time passed I realized I needed serious help because it was too much to keep in. I used to sit down and explain my feelings to the caretakers, this was therapeutic because they are aware of and understand my situation; also, they have lots of experience working with children like me. They listen to you, then come up with ideas, for example, meeting a psychologist or going to therapy, so they can help you maintain your stress level and psychological health".

On the other hand, Participant C, another Syrian adolescent, leaned into his religious beliefs to find comfort and build resilience during the stressful waiting period. "In my religion, we put our trust in God, and we believe whatever that is meant for you will always be given to you. When I pray, it calms me down and removes all my worries, stress and anxiety; it makes me feel safe and secure. Praying was a coping strategy and a special moment for me because it allowed me to reflect on my past and appreciate my present life. Just sitting on my prayer mat and communicating with my creator gave me inner peace and healed my heart. For me praying five times a day was a source of meditation; it helped me structure my day and reflect on my feelings".

In light of these perspectives, it becomes unequivocally clear that there isn't a 'one size fits all' solution to the multifaceted challenges encountered by these unaccompanied adolescents. Rather, their coping strategies are as diverse as their individual circumstances, exemplifying their unique resilience. They navigate their challenging journey utilizing an array of strategies, ranging from socialization, seeking professional help, to drawing strength from religious practices. These diverse strategies, evident in the experiences of Participants A, B, and C, underscore the study's focus on individual coping strategies rather than broadly applicable or generalizable solutions. Despite the variability, these strategies are united by a common purpose: to foster resilience and adaptability amidst the uncertainty and stress of the asylum process.
8. Conclusion

This research study sought to examine how pre-migration, migration, and post-migration factors influence the mental health and well-being of Syrian and Somali unaccompanied minors in Sweden during the asylum-seeking process. Through qualitative exploration, the study identified the asylum process as a major determinant impacting these minors' mental health, predominantly negatively. However, the asylum process alone cannot be isolated as the sole contributor to the mental health concerns of these unaccompanied minors. Other factors such as instability in their countries of origin and the traumatic journey to Sweden significantly exacerbate their psychological distress.

The unaccompanied minors' narratives about their feelings and thoughts provided a unique perspective into their mental health status. That said, this study's scope was limited to examining individual feelings and thoughts, without conducting any clinical evaluations that could identify underlying mental health disorders. Consequently, our understanding of their mental health should be considered within this context.

By utilizing the sense of coherence theory and coping theory, we were able to decipher how these minors interpret their experiences, deal with stressors, and their subsequent impact on mental health and well-being. Inductive conclusions drawn from the asylum-seeking experiences of these minors depict a picture of extreme vulnerability, especially due to the complexity and uncertainty associated with the asylum process. Stress, worry, and the constraint on their ability to make long-term plans due to their lack of legal status negatively impacted their mental health. Moreover, post-migratory stresses appeared to intensify their emotional symptoms.

However, these adolescents demonstrated unique resilience and an array of coping strategies to navigate these challenges, including seeking emotional support, venting, and drawing strength from religious practices. These diverse strategies, evident in the experiences of Participants A, B, and C, underscore the study's focus on individual coping strategies rather than broadly applicable or generalizable solutions. In conclusion, this research illuminated the significant influence of pre-migration, migration, and post-migration factors on the mental health and well-being of Syrian
and Somali unaccompanied minors in Sweden. It highlighted the need for more comprehensive support and resources for these individuals throughout the asylum-seeking process. Their resilience and the coping strategies they employ underscore the importance of developing tailored interventions to help them navigate the complex and stressful journey they face. Their freedom to achieve well-being and happiness, as they seek to start new lives, is largely in the hands of the Swedish government's decisions regarding their asylum claims.

8.1 Implications of the Research

This research offers a critical insight into the experiences of former unaccompanied minors from Somalia and Syria, especially regarding the challenges they encountered during the asylum-seeking process in Sweden. It underscores the profound effects of these experiences on their mental health and well-being and delineates the various coping strategies they employed to mitigate these impacts on their daily lives. Research concerning these two specific groups remains relatively sparse, so this study makes a significant contribution to addressing the existing gap in the literature. By amplifying the voices and experiences of these unaccompanied minors, the study highlights the urgent need for more comprehensive support and tailored interventions to enhance their resilience and well-being during the complex and stressful asylum-seeking process.

Moreover, the findings of this study carry important implications for future research and policy-making. Unaccompanied minors represent a significant proportion of the future generation. If their mental health and well-being are not adequately attended to, the repercussions could be far-reaching, affecting not just these individuals but also the societies they will eventually integrate into. Consequently, more in-depth research is warranted on this subject to foster a better understanding of their experiences, challenges, and coping mechanisms, to inform and guide appropriate interventions and supportive measures. As our understanding of this issue deepens, it is hoped that policy-makers will be better equipped to make informed decisions that consider the unique circumstances and needs of unaccompanied minors during the asylum-seeking process. In this way,
we can ensure that these young individuals are given the opportunity to heal, grow, and contribute positively to their new communities.
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10. Appendix A

Interview questions

1. General Background:
   • Can you tell me a bit about yourself and your journey to Sweden?
   • How old were you when you came to Sweden, and who did you come with?

2. Asylum Process:
   • How would you describe your experience with the asylum process?
   • What difficulties have you encountered during the asylum process?
   • How do you cope with the uncertainty during the waiting process for asylum decisions?

3. Integration:
   • How would you describe your experience adapting to Swedish society?
   • Can you tell me about any challenges you've faced with language, culture, or religion in Sweden?
   • How have these challenges affected your sense of belonging in the society?

4. Mental Health and Well-being:
   • Can you describe how your mental health has been affected during this process?
   • Have you experienced any significant stress or anxiety during your asylum process? If so, could you elaborate on it?
   • What strategies or resources have you used to cope with your mental health?

5. Coping Mechanisms:
   • What strategies do you use to cope with the stress of the asylum process?
   • Can you provide examples of activities or social connections that have helped you manage your stress and anxieties?
   • How does your religion or belief system help you cope with the challenges you face as an asylum seeker?
Appendix B

Endnotes:
The research was ethnically reviewed and approved by the Ethics Council at the Malmö University.

Author’s contributions
The author is the sole writer of this research.

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