

HAIGAZIAN UNIVERSITY

Factors that Impact the Sociocultural Adjustment and Well-being of Syrian Refugees in Stuttgart
– Germany

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DEDICATION

I would like to dedicate this thesis to all the Syrian men and women whom I have met in my inquiry, hoping that they would continue to move forward towards better well-being, deeper involvement and experiencing more belonging into the German culture.

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Abstract

This study investigated the impact of age, gender, language and acculturation choice on the sociocultural adjustment and well-being of Syrian refugees in Stuttgart, Germany. A total of 214 Syrian refugees participated in this study by filling a demographics questionnaire, the Acculturation Attitudes Scale (AAS-16), the Revised Sociocultural Adjustment Scale (R-SCAS), and the Mental Health Inventory (MHI-18). Correlation analyses and t-tests were used to examine the relationships between the different variables. A factor analysis run on the AAS-16 resulted in marginalization being discarded as a separate acculturation strategy. The results showed that the level of German language acquisition of the participants was positively and significantly correlated with sociocultural adjustment. No significant correlation was found between age and depression level as well as no significant difference in depression levels was found between males and females. Integration was found to be positively and significantly correlated with sociocultural adjustment and mental health. Assimilation was found to be positively and significantly correlated with sociocultural adjustment but no significant correlation was found with mental health. Separation was found to be negatively and significantly correlated with mental health, and insignificantly correlated with sociocultural adjustment. We concluded that higher German language levels and practicing integration act as the main protective factors against maladjustment, and that there are other factors at work affecting well-being besides age and gender. We suggest providing coaching for the refugees in sociocultural adjustment and inter-cultural issues to boost their well-being.

Key words: Syrian refugees, German language, age, gender, acculturation strategy, sociocultural adjustment, psychological well-being

Factors that Impact the Sociocultural Adjustment and Well-being of Syrian Refugees in Stuttgart – Germany

In March 2011, a series of protests and riots in Syria were the spark for the start of a civil war that perpetuated and intensified in the following 6 years. In these 6 years, Syrians experienced different kinds of traumas ranging from abductions, torture, taking arms, to witnessing the killing of family members and rape. By August 2015, according to one account, 250,000 people had lost their lives, and the Syrian war became one of the most destructive wars in our current history to debilitate and scatter around half of the population of a country (Rogers et al., 2016).

Already in February 2016, the death toll had reached 470,000 according to *Human Rights Watch* (2016). The battles caused the displacement of 6.1 million Syrians inside Syria and an additional 4.8 million left the country and sought refuge in the neighboring Arab countries or in Europe. However, this number has increased to 5.1 million in 2017 according to the Office of the United Nations High Commissioner for Refugees (UNHCR). Moreover, by June 2016, around 1 million Syrians were living in war zones and were denied humanitarian aid or life-saving interventions.

Most commonly, the countries to which the Syrians fled were the neighboring countries that share a border with Syria. This is why we find that the biggest number of refugees reside in Turkey (3 million), Lebanon (1 million), and Jordan (657,000) as reported by the UNHCR in 2017. However, the governments of Lebanon and Jordan have declared that the numbers of Syrian refugees in their countries are much higher than the official numbers (Weaver M., 2017).

According to the UNHCR (2017), these neighboring Arab countries were not the final destination for all the Syrian refugees, as many of them tried to reach Europe by the sea or through the resettlement programs mediated by the UNHCR. Many of these refugees left their neighboring country of asylum, such as Lebanon, Turkey or Iraq and moved to a further away Western country that agreed to host them. The commitment of these resettlement countries, according to the Refugee Law and Policy (2016), is to provide refugees with legal and physical protection, as well as civil, economic and political rights; by doing so, they are implementing the 1951 Geneva Refugee Convention, which was held after World War II.

However, countries of resettlement are usually more economically capable Western countries that are culturally quite different from the country of origin of the refugees. Therefore, with all its benefits, resettlement becomes a challenging life-changing event that requires the support of the government and the non-governmental organizations in the host countries to help the refugees to resettle smoothly (UNHCR, 2017).

A study carried out by Aragona, Pucci, Mazzetti, & Geraci (2012), on immigrants of various nationalities who resettled in Italy, showed that post-migration living difficulties had an impact on continued manifestation of Post-Traumatic Stress Disorder (PTSD) symptoms in these individuals who have had their share of traumatic pre-migration experiences before settling in Rome – Italy. The post-migration living difficulties that had the most impact on them were ‘poverty’ and ‘having no permission to work’. Moreover, being set in a new context where the culture, the people, the language, and the norms are totally different added to the stressful experiences of the refugees and worsened their psychological state. This is why the Western countries that are receiving refugees are mainly providing language classes, culture orientation

sessions, vocational trainings, as well as programs that provide the resettled refugees with access to education and employment (UNHCR, 2017).

Germany is an example of these countries that is putting its human, financial, and institutional resources in the service of the refugees. According to the Federal Office of Migration and Refugees (BAMF), Germany gave 256,136 people refugee statuses, during the year of 2016, out of which 166,520 persons are Syrians. Statistics show that 57% of the applications were accepted. According to Dearden (2017), Syrians comprise the biggest number of arrivals into Germany followed by Afghans, Iraqis, Iranians, Eritreans and Albanians. The year 2015 witnessed a much larger number of individuals applying for asylum (890,000) and hundreds of thousands of cases are still being processed until now.

Purpose of the Study

Since the dislocation of refugees from one culture to another has implications on their psychological health and their subsequent route of progress in the new culture, it was important to study the factors that help the Syrian refugees to integrate and adjust in their host country as well as the factors that hinder their successful adjustment. The variables that were chosen for this study build on previous research done on immigrants, who evidently differ in their pre-migration experiences, yet share the same economic and sociocultural struggles that refugees experience in the resettlement country. Therefore, this study aimed to investigate the relationship between the different variables, mainly, language, age, gender and acculturation strategy on one hand, and sociocultural adjustment, psychological well-being and depression on the other hand.

Rationale of the Study

First, research on Syrian refugees is still somehow limited and hence more research in this area was needed to widen our understanding of this topic. There are many published statistical articles about the Syrian refugee development updates, but fewer psychological articles about this specific crisis that deal with the psychological well-being and the sociocultural adjustment of refugees in the Western countries, where they have resided.

Second, the Syrian refugee crisis provides us with a model that helps to shed some light on other similar refugee situations. Many countries in the world have received or are still receiving refugees to this day. It is therefore very helpful to discover whether the same strategies of adjustment work in different contexts and whether what worked for refugees in the past is still helpful today. For instance, many Iraqis were displaced into the neighboring Arab countries, but also many were accepted as refugees by various Western countries, according to the International Organization for Migration (2017). Therefore, the sight of Arabs displaced in Western countries that neither share their language nor their culture has become quite common in this day and age. In short, there was a dire need to become more acquainted with this delicate social situation in order to discover the most successful routes of action that could help the masses of refugees in their adjustment endeavors.

Stuttgart: The Context of the Study

Stuttgart is the sixth largest city in Germany, and the capital of the German Federal State of Baden-Württemberg. It is located in Southern Germany and hosts 56 different nationalities. It is economically ahead as it is known for its automotive industry and harbors the head-quarters of Mercedes-Benz and Porsche. According to the World Population Review (2017), a total of

600,068 people live in Stuttgart. Of these there are many foreigners and also refugees. Based on the latest demographics report produced on the 31st of January of 2018 by the Social Security Office of Stuttgart, a total of 7,250 refugees reside in Stuttgart in 116 refugee establishments. Sixty-eight percent of those have come as families and the remaining 32% have arrived as singles. Syrians comprise the biggest percentage of refugees with a percentage of 27%, that is a total of 1,948 Syrians currently living in Stuttgart. This number has slightly decreased due to people returning or being displaced elsewhere in Germany. Following Syrians are the Iraqis, Afghans, Nigerians, Eritreans with 18%, 16%, 6%, and 5% respectively. Altogether Stuttgart holds 56 different nationalities of refugees.

According to the German History Society (2013), there has been in the history of Germany various waves of refugees or migrants who came and made Germany their home, starting from the 1950s where the Turks were invited to come and work, as well as the Italians in the 1960s as guest workers. Specifically in Stuttgart, this influx of foreigners happened between the years of 1955 and 1973. Germany realized the need for man power especially following the World War II in order to boost the economy; and this initiated the influx of workers into Western Germany. Afterwards, the wars that broke out in various parts of the world as well as the poor economy in Eastern Europe also contributed to the influx of people into Germany. This is why it is not a strange sight to see foreigners around Stuttgart, which is considered one of the main leading powers in the economy of Germany. The picture differs considerably in other places in Germany such as the East of Germany from which around 1.7 million people fled to the West following the 1990 events of the reunification of Germany (World Population Review, 2017), and which is to some extent still affected by the rule of the Former Soviet Union, where refugees there seem to have very different experiences and impressions of Germany and Germans, based

on first hand testimonies. The current study was conducted in Western Germany, and this can be considered a limitation of the study, as the results cannot be generalized to Syrians living in Eastern Germany, where their experience might differ totally.

Background of the Study

The following section comprises of the results of previous studies conducted with immigrants, which will serve as the background of the hypotheses examined in this study.

Language and Social Adjustment

A study by Watkins, Razee, and Richters (2012), targeting Karen refugees in Australia showed the critical role that language plays in allowing the adjustment of these men and women from Burma, who fled their war-torn countries and found home in Australia. The language barrier was found to be the biggest challenge to their adjustment in Sydney. Watkins et al. (2012) noted that acquiring the language would have helped decrease their social isolation, manage their daily life needs, and widen their educational and vocational opportunities. The Australian government dealt with this challenge through providing 510 hours of English classes at least upon arrival. According to Watkins et al. (2012), the study also showed that the pre-migration conditions as well as the post-migration ones affected the ability of the Karen refugees to acquire the English language. Mainly, women had the least opportunities to learn it. Due to the poor socio-economic status back in Burma, as well as the cultural traits that dictated their lifestyles, women had a lower chance of being educated. Instead, they were care-givers to the children and the elderly in their families. This made their attempt to learn English in Australia a real challenge since starting from alphabet-learning all the way to speaking the language required great efforts. In Australia, their roles did not change much, which meant that they again needed to stay home

and care for the children, and so they skipped the language classes or postponed them until a later phase in life. This naturally added to their isolation and affected their well-being. In addition to that, the shyness that is a typical cultural trait for the Karen refugees meant that they would not express their distress openly and they would not be keen to speak English inadequately (Watkins et al., 2012).

Sharing a common language with another human being bridges gaps, and the opposite can build walls and isolate refugees even further. In his research review for the Program of Intercultural Conflicts and Societal Integration (AKI) in Berlin, Esser (2006) pointed out how one's language level conveys information about their belonging or foreignness and thus triggers friendliness or discrimination from the conversing partner. According to the author, mastering the language of the host country is surely possible but it requires time and therefore, age upon arrival of the refugee plays a big role in their smooth integration, as learning an additional language until the age of 10-12 is optimal. Although learning a new language after puberty is still possible, it requires a higher level of motivation and effort. Plus, having a certain educational level prior to migration can make this task easier or harder (Esser, 2006).

Finally, it has been observed that resettling in a neighborhood with a high concentration of people from one's country of origin will hinder their progress in acquiring the language of the host country and therefore, delay their subsequent integration process (Al Jebawi, 2015). According to Al Jebawi (2015), this is a situation that most refugees are put into upon arrival before they are given the liberty of finding their own accommodation outside the refugee camp. Therefore, the interest of this study was to examine the association between the German language proficiency of the Syrian refugees in Stuttgart and their sociocultural adjustment.

Age and Well-being

According to a study by Janssen-Kallenberg, Schulz, Kluge, Strehle, et al. (2017), based on Turkish migrants in Germany, higher depression rates and therefore, lower well-being were observed among migrants as compared to indigenous citizens of the host country. More specifically, elderly migrants of both genders exhibited higher rates of depression, as compared to members of the host population. Dysthymia, which is mild depression of persistent nature, was the most common type of depression observed among the elderly migrants. Apparently, the migration process as well as the psychosocial experiences that the older people go through in the host country add to their natural age-related stressors.

According to Agrawal and Jaiswal (2013), old age is marked by a number of stressors which include the health challenges, economical ones, as well as psychosocial alterations. These together affect the immune system of the elderly person and exacerbate health issues even further. The economic reliance on the government or on family members puts the older adult in an inferior and vulnerable position that differs from their earlier years, when they were more readily involved in productive and self-fulfilling tasks. Moreover, their coping methods change and become more passive and emotion-focused as opposed to active and problem-focused, and this contributes to their depression. With age, people tend to lose more and more of their loved ones as well and often move into a lonelier stage of life, especially when spouses die or children move out. All these stressors posit a real challenge in regular life conditions, and how much more in the case of displacement of the elderly into a new society, where they need to adjust to the culture, language and norms of the host country (Agrawal & Jaiswal, 2013).

Moreover, if learning the language is key to the integration of refugees in a new country, as discussed above, then this already is a real challenge for older adults who are experiencing certain cognitive changes, such as, concentration difficulties, problems in storage of information, and its subsequent retrieval from long-term memory (Reid et al., 2017). This is an extra challenge for the organizations in the host countries that are working on facilitating the adjustment of refugees in their countries, no matter to which age range the refugee belongs. Therefore, this study aimed to examine if depression rates among the Syrian refugees increased as a function of age.

Sociocultural Adjustment and Well-being

According to Ward and Kennedy (1999), cross-cultural adaptation can be divided into two distinct factors: psychological well-being and sociocultural adjustment. Psychological well-being involves affective and emotional health of the individual as well as stress and coping abilities, while sociocultural adjustment involves learning about the culture and acquiring appropriate behavioral skills that help the individual to 'fit in' in the host culture. Psychological well-being is affected by the inner reservoir of the person, the personality, life changes, social support, and coping styles of the individuals. On the other hand, sociocultural adjustment is more related to the length of stay in the host country, perceived cultural distance, acculturation strategies used, learning the culture, acquiring social skills, managing daily life matters, as well as interacting with the host population and acquiring the language of the host country (Ward & Kennedy, 1999). It is no accident that the two main dependent variables that were examined in this study were specifically sociocultural adjustment and psychological well-being.

Depression and Gender

Depression was also examined in this study, as it is one of the subscales of the Mental Health Inventory that was filled out by the participants. Depression is a mental disorder that affects mood, pleasure, energy, self-worth, sleep, appetite, concentration, and in some cases leads to substance abuse or even suicide, according to Feyera, Mihretie, Bedaso, Gedle, & Kumera, (2015). Depression is a common disorder and those who are mostly prone to suffer from it are the most vulnerable groups, such as, abused women, the homeless, the neglected elderly, persons with low education and/or no chance of employment, and refugees or migrants (Feyera et al., 2015).

As mentioned earlier, women are commonly more bound by their gender roles in certain cultures and this affects their educational level gained in their country of origin, as well as their availability to learn and enter into the vocational field in the resettlement country. According to Göregenli, Karakuş, & Gökten, (2016), for example, Kurdish female migrants who resettled in Turkey experienced less integration than their male counterparts. Apparently, the language and cultural differences in the host country made their adaptation process more difficult.

Looking more closely into gender differences concerning Major Depressive Disorder symptoms, Janssen-Kallenberg et al. (2017) pointed out some interesting results in a study carried out with Turkish migrants in Germany. Females were found to exhibit more severe depressive symptoms as compared to men. Among those showing moderate depressive symptoms, 70.3% were women and 29.7% were men. And among those exhibiting severe depressive symptoms, 74.5% were women and 25.5% were men. It makes sense that one aim of

this study was to also inspect the relationship between gender and depression among the Syrian refugee population in Stuttgart.

Acculturation vs. Sociocultural Adjustment and Well-being

According to Zisberg, A. (2017), culture is defined as the set of norms, values and worldviews shared by a certain social group. It is so powerful that it shapes the attitudes and behaviors of individuals, because it acts as the specs through which people see the world around them. Consequently, when a person moves from one culture to a different one, a certain identity crisis occurs within and the way a person reacts and changes in response to their presence in the new culture is called ‘acculturation’ (Zisberg, 2017).

There is no one correct way of responding to a new cultural surrounding. John W. Berry (2006) defined acculturation as a bi-dimensional process of cultural and psychological change resulting from continued contact with people of different cultural backgrounds, and it varies according to the degree to which an individual takes part in the cultural life of the host country and the degree to which this individual holds on to their original cultural identity (Göregenli et al., 2016).

According to Berry (2006), when considering the different options of how a person responds to the new culture, one finds that there are four distinct strategies of acculturation: assimilation, integration, separation, and marginalization. Assimilation is when the immigrants adapt to the new culture and drop their old cultural identity. Separation is when the immigrants maintain their original cultural identity and resist the new culture, values, and behaviors. Integration is when the individuals maintain their original cultural identity while learning from and adapting to the host culture. Finally, marginalization is when the immigrants get stuck

between the two cultures and somehow reject both, and therefore, shun the host culture and stop identifying any longer with the culture of origin (Fang, Sun, & Yuen 2016). According to Stephens (2016), people use these different strategies interchangeably in different domains of life. Some might choose a strategy of assimilation when it comes to organizing daily life chores, while they choose the separation strategy to deal with family issues.

Before we go into a comparison between the different strategies of acculturation, it is important to note that the process of acculturation itself is a source of stress because it includes losing a lot of the protective social support and cultural values that one was accustomed to in their original culture. This makes the immigrant more vulnerable to depression and substance abuse as compared to locals in the host culture (Bazargan-Hejazi et al., 2016).

Looking more closely on the different strategies of acculturation, we see that each involves a different amount of sociocultural change and therefore has a different impact on the experience of the immigrant in the host culture. For instance, according to Stephens (2016), assimilation is generally expected to promote better well-being as the immigrant immerses into the host culture. However, findings have varied and Stephens explains that this variation is connected to cultural distance between the culture of origin and the host culture. Assimilation requires a very high level of sociocultural change in cases where there is a big cultural distance between the host culture and the culture of origin, as is the case of the Syrian refugees residing in Stuttgart. The purposeful suppression of the original culture and the desire to forcefully 'fit' into the host culture often produces a feeling of inauthenticity and cognitive dissonance that have negative effects on the immigrant's well-being, while on the other hand, the person enjoys relatively high levels of sociocultural adjustment. On the other hand, assimilation of culture that does not differ a lot from one's culture of origin requires less sociocultural adjustment and this

can explain why sometimes assimilation is associated with higher well-being rates. Moreover, the attitude of the host individuals as well as the motivations of the immigrants, for instance, economic immigrants, would more readily assimilate into the host culture than others who feel discriminated against or who were forced to migrate into the host country. On the other hand, separation requires the lowest level of sociocultural change, however, it leaves the immigrant isolated and experiencing low sociocultural adjustment. The psychological well-being, however, can be intact if the person is surrounded by a community of immigrants from the country of origin (Stephens, 2016).

According to Eshel and Rosenthal (2000), a total of 300 Jewish youth from Russia who had moved to Israel participated in a study that aimed to examine the relationship between various acculturation strategies and sociocultural adjustment. The results showed that integration correlated with higher levels of sociocultural adjustment, as it invoked little acculturation stress. Separation, on the other hand, was associated with lower levels of sociocultural adjustment. Marginalization, which requires the least amount of cultural change, but involves the shedding of one's own culture of origin, results in isolation from both cultures and consequently leads to poorer psychological well-being and sociocultural adjustment (Eshel & Rosenthal, 2000).

As might be expected after stating the above, the integrational strategy of acculturation remains the most balanced one as it does not include a big amount of sociocultural change and therefore posits a lesser amount of stress on the immigrant. According to Eshel & Rosenthal-Sokolov, (2000), the strategy of integration is correlated with higher rates of psychological well-being. The authors also note that there exists a positive correlation between integration as a strategy of acculturation and sociocultural adjustment, however, this correlation does not imply a causal relationship. It might simply be that there is a third factor contributing to both, such as

acceptance from the host culture. Therefore, it was the purpose of this study to examine the acculturation strategies adopted by the Syrian refugees residing in Stuttgart and study the relationship between these strategies on one hand, and the sociocultural adjustment and psychological well-being scores on the other.

The Problem Statement

The Syrian civil war has led hundreds of thousands of people to leave their country and seek refuge in the neighboring Arab countries but also in the further away Western societies. The language and culture differences in the countries where they were relocated to and the initial instability act as further stressors to the refugees and can hinder their healing from their pre-immigration traumatic experiences and cripple their adjustment (Heptinstall, Sethna, & Taylor, 2004). Studying the factors that help refugees adjust to their new permanent home and those that hinder their adjustment could help put an end to the continued presence of stressors and contribute to the adjustment and well-being of refugees, wherever they may reside.

Based on various studies done on immigrants and refugees in different parts of the world, it was noticed that language, age, gender and acculturation strategies had an effect on the level of sociocultural adjustment and the well-being of these individuals. Therefore, in this study we attempted to examine if those previous results also apply to the Syrians who have been given refuge in Germany. The following hypotheses were examined in this study:

Hypothesis 1: Higher levels of language proficiency are positively correlated with higher levels of sociocultural adjustment.

Hypothesis 2: Age and symptoms of depression are positively correlated.

Hypothesis 3: Syrian female refugees experience depression more than men.

Hypothesis 4: Concerning the acculturation strategies:

A: integration is positively correlated with sociocultural adjustment and psychological well-being;

B: assimilation is positively correlated with sociocultural adjustment and negatively correlated with psychological well-being;

C: separation is negatively correlated with sociocultural adjustment and with psychological well-being.

The professional significance of the study

This study contributes to the field of research concerned with refugees and displaced people groups all around the world. The results of this study aimed to benefit the humanitarian organizations and the social workers who are occupied in enhancing the well-being of refugees who reside in their areas, by raising their awareness about the most vulnerable and at-risk groups. Moreover, the recommendations of this study focused on raising the cognitive awareness of the refugees themselves by attempting to make them understand the emotions and struggles that they are going through as well as the optimal steps and attitudes that would help them reach better adjustment and experience more well-being.

In addition, the results of this research study will inevitably provide the local organizations with a set of recommendations to be shared with the host society in order to help them see the refugees from a psychological and a humanitarian point of view. The purpose was that such a step would raise compassion levels and maybe produce acceptance behaviors among

the host country that help advance the well-being and the adjustment of the refugees even further. Finally, the goal was also to raise the interest of lay-persons who are willing to volunteer to serve the refugee population in different ways.

Overview of the Methodology

This study was a quantitative one applying correlational research methods and t-tests to examine the proposed hypotheses. A purposeful convenient sample of 214 adult Syrian refugees living in refugee establishments as well as in private housing in Stuttgart, Germany was assessed through self-report measures. The survey package included a demographics questionnaire, in addition to questions about their experience in Germany, as well as three psychological scales: The Acculturation Attitudes Scale (AAS-16), the revised Sociocultural Adjustment scale (SCAS-R), and the mental health inventory (MHI-18). The survey package was administered in the Arabic language after the three scales were translated to Arabic and then back translated to English. The data were analyzed using the IBM SPSS Statistics program Version 20.

Limitations of the study

The study included two limitations that relate to the type of the sample: First the study was carried out in the city of Stuttgart, which lies in South West Germany. The results might differ in other parts of Germany where the experience of the refugees might differ completely. Second, the largest proportion of these participants resided in refugee establishments in Stuttgart, therefore, the results are biased to those living there and not in private houses. For these two reasons, the author could not generalize the findings to all Syrian refugees living in Germany but most likely to those residing under very similar conditions.

Definition of Terms

Refugee: A refugee is someone who has been forced to flee his or her country because of persecution, war, or violence. A refugee has a well-founded fear of persecution for reasons of race, religion, nationality, political opinion or membership in a particular social group. Most likely, they cannot return home or are afraid to do so. War and ethnic, tribal and religious violence are leading causes of refugees fleeing their countries (UNHCR, 2017).

Acculturation: The way a person reacts and changes in response to his or her presence in a new culture. It is measured in terms of the person's readiness to maintain their own cultural heritage while in the host society, as well as their willingness to participate in the host culture (Ziesberg, 2017 & Demes and Geeraert, 2014).

Assimilation: It is when the individual shows a high orientation toward the host culture and disconnection to the home culture (Demes and Geeraert, 2014).

Separation: It is when the individual maintains a high connection with the culture of origin and does not embrace the host culture (Demes and Geeraert, 2014).

Integration: It is when the individual shows connectivity with the culture of origin while embracing and participating in the host culture (Demes and Geeraert, 2014).

Marginalization: It is when the individual rejects both the host culture and the culture of origin (Demes and Geeraert, 2014).

Sociocultural adjustment: Refers to the ability to 'fit in' into the new cultural environment and to negotiate interactions with members of the new culture effectively. It incorporates communication and social interaction skills, and it is characterized by the development of

adequate social and cultural skills to handle daily social situations and demands of the mainstream cultural context (Sumer, 2009).

Psychological well-being: Refers to the emotional and the affective side of adaptation. It is the personal life satisfaction and is understood in terms of stress and coping strategies, depression, loneliness, homesickness, and is affected by social support and personality types (Ward & Kennedy, 1999; Sumer, 2009).

Depression: A psychological disorder that is marked by the presence of sad, empty, or irritable mood experiences, accompanied by somatic and cognitive changes that significantly affect the individual's capacity to function. It can take many forms and this is why there is series of different depressive disorders, and those differ among one another in their duration, timing, and causality (DSM Library, n.d.).

Chapter 2

Review of Literature

Psychological well-being and sociocultural adjustment are variables that have been studied extensively in relation to other factors, such as, choice of acculturation strategy, language proficiency, gender, age, social support, etc. The purpose of this study was to investigate the relationship between the different variables, mainly, language, age, gender and acculturation strategy on one hand, and sociocultural adjustment and well-being on the other hand among a sample of Syrian refugees residing in Stuttgart, Germany. Therefore, in order to provide the needed context for the examined hypotheses in this paper, this chapter is a review of literature that focuses on a series of studies in the field of inter-cultural adjustment and adaptation.

Theoretical Background of “Acculturation”

Acculturation is the process of cultural changes that take place in two different cultural groups who come in contact with one another. It involves cultural, behavioral and psychological changes that follow direct contact with the different culture. There are two models of acculturation that have been used in previous literature, the unidimensional and the bi-dimensional models, according to Yu and Wang (2011). The unidimensional model assumes that acculturation is the process of growing in the direction of the host culture. Individuals may differ in their speed of reaching that eventual adaptation. It also includes dropping the old as they acquire the new culture. This view has received a considerable amount of criticism as migrants were seen to choose various approaches to acculturation (Yu & Wang, 2011). This prepared the stage for a bi-dimensional model proposed by Berry in 1974, where he suggested two independent dimensions associated with acculturation, the degree to which a person wishes to

maintain or let go of their culture of origin, and the degree to which they would like to adopt or reject the host culture. Crossing these two aspects together produces four distinct acculturation strategies: integration, assimilation, separation and marginalization, where integration seeks to maintain the culture of origin while adapting and connecting to the host culture; assimilation seeks connecting and adapting to the host culture while disconnecting from the culture of origin; separation implies seeking to hold on to the culture of origin while rejecting the host culture; and marginalization rejects connecting with both, the culture of origin and the host culture (Yu & Wang, 2011).

The acculturation process involves a certain amount of stress and stepping out of one's comfort zone and this can have a different effect on different individuals depending on different factors: age, gender, education level, perceived cultural distance, language acquisition, as well attitude towards the culture and acculturation strategies (Yu & Wang, 2011). According to Ward and Kennedy (1999), cross-cultural adaptation can be divided into two aspects, the psychological adaptation and the sociocultural adjustment. Psychological adaptation implies the personal well-being and mental health of the individual who is displaced and therefore, it is connected to one's emotions, affect, and life satisfaction, and is influenced by one's personality, social support, and coping styles. On the other hand, sociocultural adjustment refers to the ability of the individual to function in the new culture, when it comes to managing daily life chores and therefore, it is more related to the social skills acquired in the new society, the behavioral competence of the individual, and one's ability to 'fit' into the new society. Therefore, even though these two factors are related, nonetheless, they are empirically and conceptually distinct. Based on the above, this study examined each of these two concepts, mainly psychological well-being and

sociocultural adaptation, in relation to the different demographic variables and the acculturation strategies.

Acculturation vs. Psychological Well-being

The acculturation process can exert a lot of weight on the psychological well-being of refugees as they encounter various cultural mismatches and new challenges in the host culture. In this section, we attempt to look at the results of various scientific studies in order to examine the relationship between the choice of acculturation and its relationship with psychological well-being. A study conducted by Kim (2009) involved 78 adult Korean Americans living in America and examined the relationship between multidimensional acculturation and experiencing depression symptoms, using the Acculturation Attitudes Scale (56-item instrument) that assesses 14 different domains of life, with four questions on each domain, covering the four different acculturation attitudes. The Center for Epidemiologic Studies-Depression Scale (CES-D) was used to assess the depression symptoms of the participants, including negative affect, positive affect, somatic and retarded activity, as well as interpersonal difficulty. Previous studies by Kim (1988) had shown that integration and assimilation were related to better mental health scores. However, the results of this study showed conflicting results when it comes to assimilation. First, the study showed lower depression levels as compared to other similar studies conducted with Korean Americans. Several explanations were suggested, namely, that the sample chosen was not comprised of elderly or women exclusively like the previous studies. Moreover, the participants of this study belonged to the middle/upper middle economic class which might have alleviated their depression symptoms as compared to participants in other studies with lower income who are prone to encounter more daily life stressors. Moreover, these participants were mainly selected from Korean organizations functioning in the States which means that those

candidates have good connections in their host culture and this might have played a role in shielding them further from depression. In spite of that, their depression scores still turned out to be higher than those of Koreans in Korea, other Asian Americans, and European Americans. When a multiple regression analysis was run, the results showed that integration, and not assimilation, as an acculturation attitude is most predictive of low depression levels and marginalization is most predictive of high depression levels. Other studies (Padilla, 2006) have further shown that those who practice integration often have the flexibility to switch between two cultures and act like a cultural liaison between the different ethnic groups, while marginalized people tend to be less educated, have a lower income, lower language proficiency, and subsequently lower life satisfaction.

According to a study by Abu-Rayya (2007), the choice of acculturation style affected the psychological and marital well-being of Christian Western and Eastern European spouses, who were married to Muslim Israeli Arab men. The participants were part of ethnic-mixed and faith-mixed marriages and had moved since wed-lock to reside in Israel. A total of 156 women participated in the study, where each filled out a background questionnaire, the Stephenson Multi-Group Acculturation Scale, a Self-Esteem questionnaire, positive and negative affect, marital satisfaction, marital intimacy, as well as Christian religiosity questionnaires. The study showed that those who adopted the integration and assimilation styles experienced the highest levels of self-esteem, positive affect, marital satisfaction, and marital intimacy as compared to the other participants. The positive results that accompanied assimilation acculturation styles differed from the expectations based on previous studies with immigrants. Apparently, the experience of spouses in inter-cultural marriages and those of immigrants differ, where assimilation can assist the spouses in eliminating marital tension. On the other hand, spouses

who adopted the separation style showed intermediate levels of psychological and marital well-being, while those who practiced the marginalization style of acculturation experienced the lowest levels in well-being (Abu-Rayya, 2007). We conclude that other factors often intervene to yield results that are slightly different from the expected.

Kim (2006) conducted a study with a total of 141 Korean Canadians, with the aim of examining the acculturation attitudes adopted by Koreans living in Canada and the association between those attitudes and the corresponding mental health statuses of the participants. The participants were asked to fill an Acculturation Attitudes Scale (56-items), identify themselves as Korean, Canadian, or Korean-Canadian, and questions that show with which culture the participant identifies more. A demographics questionnaire was included, as well as a number of other related questionnaires, including life satisfaction scales. The results showed integration to be the most preferred pattern of acculturation, followed by separation, while assimilation was the least preferred one. Integration was also significantly correlated to better knowledge of Canada, lower perception of discrimination and greater life-satisfaction in Canada. It is the most realistic choice also for first-generation Koreans who moved into Canada, a country whose culture differs significantly from their heritage culture, especially that first-generation Koreans don't possess the adequate language levels and social skills that allow them to assimilate easily. Moreover, the Koreans had had their share of bad experiences with Japanese colonialism forcefully assimilating them into its culture as well as experiencing discrimination and prejudice which makes them strive intentionally to keep their collectivistic cultural identity and not be inclined towards assimilation. Those who chose assimilation were mostly the Christian Koreans who faced fewer adaptation difficulties than the Buddhist Koreans and expressed less desires to return. Those who were inclined towards separation were the new-comers, and separation was found to be

negatively correlated with length of residence. Those in the separation pool and the marginalization one experienced more stress, belonged to a lower socioeconomic level and lower educational level, perceived more discrimination, and experienced lower life-satisfaction (Kim, 2006).

A study conducted by Schmitz and Schmitz (2012), aimed to examine the reason why migrants choose a particular acculturation pattern rather than another and why some adjust more than others. A total of 349 immigrant Turks and North Africans living in the Western part of Germany and who had been there for at least 15 years or who were born there participated in the study. They were asked to fill a mood scale which tests for emotional intelligence (EI), the Acculturation Attitudes Scale (AAS), whether they perceive discrimination or prejudice, the Satisfaction with Life Scale (SWLS), the subjective happiness scale (SHS), and the Beck Depression Inventory to measure personal adjustment. The results showed that high levels of emotional intelligence are correlated significantly with beneficial acculturation attitudes, namely integration, and negatively correlated with the choice of separation and marginalization as acculturation attitudes. Those who perceived less prejudice scored better on the adjustment variables. Emotional intelligence seemed to act as a protective factor as it provided the person with flexibility to deal with situations, regulate emotions, and adapt to cultural stressors in the host environment. Finally, integration and assimilation were significantly correlated with higher life satisfaction and happiness and negatively correlated with depression (Schmitz & Schmitz, 2012).

Based on the studies above that discussed assimilation, one can conclude that various studies have shown assimilation to be connected with higher well-being, while others yielded varying results. It seems that the results differ among certain cultures and ethnicities according to

Asvat and Malcarne (2008). The authors carried out a study that involved 68 Muslim students living in Canada after having migrated from South Asian and Middle-Eastern countries, or who were second generation migrants in Canada. Asvat and Malcarne argued that even though many support the general notion that integration is related to highest level of well-being, marginalization to the least, and separation and assimilation lie somewhere in between, there still seems to be other factors at work, namely, cultural distance. The reasoning is that immigrants that perceive large cultural distance between their country of origin and their host country experience more acculturative stress as they attempt to assimilate into the new culture, and this has a heavy impact on their mental health. The results of their study confirmed this reasoning, as the Muslim students who identified strongly with their culture of origin experienced higher depression levels since their arrival, as they had lost their social support and protective cultural aspects (Asvat & Malcarne, 2008).

The influence of cultural distance was shown through another study conducted by Göregenli et al. (2016), on Kurdish and Turkish immigrants inside Turkey. Results showed that Turkish immigrants readily chose assimilation as a strategy of acculturation, however, Kurds were more inclined towards choosing separation. The common language and similar cultural experiences allowed Turks who were displaced inside Turkey to assimilate more readily, while not speaking the language and being culturally distinct from Turks hinder Kurds to assimilate. Instead, due to experiencing discrimination and some harassment from Turks, they choose separation more readily (Göregenli et al., 2016).

A study carried out by Oh, Koeske, and Sales (2002) on 157 Koreans who lived in the United States aimed to distinguish between language and social assimilation on one hand, and identity assimilation on the other hand. The results of this study showed that those who

assimilated with regard to acquiring the language of the host culture and interacting with the host society experienced lower acculturative stress and therefore, lower depression. On the other hand, those who assimilated with regard to adopting the identity and the traditions of the host culture, experienced the acculturative stressors that come from shedding one's own identity and traditions, and therefore, they experienced higher levels of depression (Oh, Koeske, & Sales, 2002).

In line with all of the above discussed literature, the study hypothesized that assimilation and separation are correlated with lower scores of psychological well-being, while integration is correlated with higher levels of psychological well-being. Marginalization was discarded from this study as an acculturation strategy due to the fact that factor analysis performed showed that the items of this particular subscale were spread out among the other subscales. Therefore, marginalization was considered to be a weak construct.

Acculturation vs. Sociocultural Adaptation

Once a person moves into a new culture, the process of sociocultural adaptation starts to take place. This process involves a considerable amount of new routines, norms, and requirements that are required of the new settlers, including, communicating with the locals, finishing paperwork, adjusting to the new neighborhood, following the rules of the host country, and so on (Sumer, 2009). Therefore, in this section we aimed to examine the relationship between the acculturation strategy of choice and the level of sociocultural adjustment attained by migrants. According to a study by Eshel (2000), a total of 300 Russian Jewish students who had come to study in Israel participated in the study in which they filled self-report questionnaires about their strategies of acculturation as well as their perceived cross-cultural adjustment. On the

other hand, the local consultants who got to know the participants personally through their daily encounters with them filled their own report about the students. Results showed that separation as an attitude of acculturation was negatively correlated to social adjustment. Integration as a choice of acculturation was related significantly to social adjustment. This does not suggest a causal relationship, because it also could be that good sociocultural adjustment directs a person towards choosing an integrational acculturation attitude, or maybe there is a third variable that affects both, for instance acceptance and good connection with the host society. There was no significant relationship between marginalization and sociocultural adjustment and this might be explained by the fact that the reliability of the marginality scale was relatively low. The sociocultural adjustment of the sojourners did not seem to improve as a function of time and this might be explained by the fact that it takes a few months before individuals can realize the implications of being dipped in a new culture (Eshel, 2000).

A study by Kasic (2002) was conducted with a total of 172 Croatian immigrants and 179 Polish ones who had moved to Italy for economic and education motives and were there for more than 10 months and less than 10 years. They had to fill a questionnaire that included demographics questions, sociocultural and psychological adaptation assessment questions, acculturation strategies questions, as well as some others. These were developed by the researcher for the purpose of the study. The results showed nostalgia to be significantly negatively correlated with sociocultural adaptation. Moreover, low nostalgia and high levels of relationships with the host were significantly related to assimilation, while high nostalgia and high levels of relationships with the host were significantly related to integration. On the other hand, high nostalgia and low levels of relationships with the host significantly correlated with separation and finally, low nostalgia and low relationships with the host correlated significantly

with marginalization. Those who practiced separation as an acculturation strategy showed preference for friendships with fellow nationals rather than host individuals. Furthermore, separation correlated significantly with lower levels of sociocultural adaptation, followed by marginalization, as compared to the other two acculturation strategies, which showed similar levels of sociocultural adaptation. Additionally, integrated and assimilated migrants showed lower levels of emotional disorder and psychosomatic symptoms, as compared to the separated and the marginalized ones (Kosic, 2002).

The results of Berry et al.'s study (2006) also showed that those inclined towards integration also exhibited better psychological and sociocultural adaptation, while those who were confused about both cultures and were inclined towards marginalization, showed weakness in both forms of adaptation. Those who chose separation as their acculturation strategy scored well on psychological well-being but poorly on sociocultural adaptation, while choosing assimilation was also associated with having relatively higher psychological and sociocultural adaptation. Perception of discrimination was connected to choosing marginalization and separation as modes of acculturation and therefore preferring to avoid contact with nationals. Perceiving discrimination was also connected to poorer adaptation altogether.

Therefore, based on the discussed literature so far, we hypothesized in this study that integration and assimilation are positively correlated with higher levels of sociocultural adjustment, while separation is correlated with lower levels of sociocultural adjustment.

Choice of Acculturation Strategies

Different factors affect the specific acculturation strategies chosen by immigrants in the host countries. There might be certain factors also influencing the choice of acculturation

strategy of the Syrian refugees who are the focus of this study. Therefore, it is interesting to present the results of some previous studies to see which factors are at work in influencing the choice of acculturation style.

According to a study by Yu and Wang (2011), a total of 64 Chinese students living in East Germany filled out a set of questionnaires, namely, a demographics part, an acculturation strategies test (EAAM), language proficiency questions, language learning motivation, cultural identity and belonging questionnaire, social adaptation scale, the symptoms outcome test assessing depression, anxiety and psychosomatic symptoms, as well as stressful experience adaptation questionnaire. The results showed integration and separation to be the most common acculturation styles adopted by the students, which partially contradicts results of previous research, where integration is the pattern of acculturation that is commonly the most preferred, and not separation. This might be based on the fact that the studied sample are students wishing to go back to China and so they don't have the incentive to practice assimilation. Even though the participants possessed the necessary language skills they needed, they still socialized mostly with other Chinese individuals. The great cultural distances between Germany and China might have also prompted the students to prefer separation. The choice of integration also as a favorite mode of acculturation might reflect the desire of the Chinese students to fit in, as a reaction to the big cultural gap that they often experience. Furthermore, the Chinese community in Germany is not very wide or established like the Turkish community for example, as they consist mainly of students and workers, and therefore their feelings of inferiority and their perception of discrimination, irrespective of whether discrimination is real or imagined, prompts them to choose separation more readily. When the host culture and the culture of origin are not so far apart, this allows immigrants into the host culture to eventually integrate without having to

practice a big behavior shift and therefore experience less acculturative stress. Chinese culture is highly communal and seeks harmony in relationships while the German one is basically individualistic and values assertiveness and clarity. Therefore, communication problems are bound to arise when these two cultures come into contact. Gender differences were also observed in choice of acculturation strategies where females reported that they preferred integration while the men reported separation as an acculturation strategy of choice. This might be explained by the fact that Chinese girls are more easily accepted by the German society than Chinese boys, as is seen by the higher level of intermarriage between Asian women and Western men (Yu & Wang, 2011).

According to a study conducted by Berry, Phinney, Sam, & Vedder (2006), a total of 7997 youth between the age of 13 and 18, of whom 5366 were immigrants and 2631 were nationals (to be used as a comparison group) took part. The study aimed to examine how immigrant youth adapt to a new culture and how they live in the new culture. The participants came from 26 different countries and resided in the following resettlement countries: Australia, Canada, Israel, New Zealand, and the United States. The questionnaires they were requested to fill included questions about their acculturation attitudes, their sociocultural adjustment, their sense of belonging to their culture of origin or to the host culture, their proficiency in the host language and language use, contact with peers from their ethnic community as compared to those from the host community, perceived discrimination. Moreover, psychological adaptation was assessed through three scales, namely, life satisfaction, self-esteem, and psychological problems. The results showed that around 36% of the youth chose integration as their mode of acculturation. Around 22% of the youth chose separation as they were more oriented towards their own ethnic group, while 18% chose the assimilation style of acculturation and this was the

lowest percentage. This might be explained by the fact that the neighborhoods where the refugees resided might have been void of nationals, and therefore, it was more difficult for them to choose assimilation. The remaining 22% had no clear inclination towards one of the two cultures in particular, and these present a vulnerable group because they are more prone to psychological and social problems than those choosing the other 3 modes of acculturation. The longer the youth resided in the host culture, the more they tended to choose integration. It is important to also note that most of the youth who chose integration lived in ethnically mixed communities, while only very few of those who tended towards marginalization lived in such mixed communities. On the other hand, those who chose separation resided mostly in homogenous communities where people of their own ethnicity resided, while those who chose assimilation lived in neighborhoods where nationals reside predominantly. These results suggested that the context influences the choice of acculturation of the youth. (Berry et al., 2006). Therefore, there are factors that affect the choice of acculturation strategies, and it would be interesting to discover if these same factors affect the choice of acculturation of the participants in the current study.

The Effect of Age and Gender on Psychological Well-Being

The relationship between age, gender and well-being, during the adaptation process of the refugees, was also examined in this study. In a study of Hmong refugees, the researcher concluded that when older individuals are displaced from what is familiar to them and they resettle on new soil, it is a great source of distress for them as they have been pulled out from the resources that they would have built up for years (Detzner, Senyurekli, & Xiong, n.d.). They lose the social network where they might have been central figures and become new-comers and strangers in a place that they don't know and that doesn't know them. Hence, it is not surprising

that a group of older Hmong refugees exhibited more depressive symptoms than younger adults in the United States (Detzner, Senyurekli, & Xiong, n.d.).

A qualitative study conducted by Tabari, Khaghanizade, Dehghan-Nayeri, and Najafi-Mehri (2017), aimed to identify the factors that influence the mental health and well-being of elderly individuals. The study was conducted in Iran using semi-structured and in-depth interviews. The results showed that communication with others, religiosity, being consulted about various life matters, being employed and being a productive member of the family, having family support, social support and respect are factors that help the elderly enjoy a sense of worth and have a positive impact on their mental health (Tabari et al., 2017). Some of these factors, however, are lost when refugees who are advanced in age are displaced into a new culture, especially since they can seldom get employed in the host culture. Moreover, they do not get consulted by any of their relatives, because suddenly they became the least informed in the new culture, have lost their social support, and cannot communicate easily with others because of the language barrier (Tabari et al., 2017).

A study was conducted by Polek, van Oudenhoven, ten Berge (2008), that involved 408 Polish, 100 Russians, and 123 Hungarian immigrants and aimed to study the effect of demographic factors and attachment styles on the psychological and sociocultural adjustment of the immigrants in the host culture. The instruments used included a demographics questionnaire, including questions about age, education, length of stay, as well as a psychological assessment scale (Psychological Health scale), a satisfaction with life scale, and a sociocultural adjustment scale (Social Support List - Interactions), as well as a few other scales. The results showed that the age of the participants at immigration was negatively correlated to psychological and

sociocultural adjustment as well as identification and contact with the host society (Polek et al., 2008).

According to Lee and Green (n.d.), the acculturation preferences of 110 Hmong who came as refugees from Laos after the Vietnam war and lived in Eastern Wisconsin were examined using the East Asian Acculturation Measure (EAAM) developed by Barry in 2001. These refugees were divided into three different groups: a) those who came to the States when they were older than 12 years old, b) those who came to the States between 3 and 11 years of age, and c) those who came to the States when they were at the age of 2 or less or were born there. Integration was the most favorable style of acculturation chosen by all groups, followed by separation, assimilation and lastly marginalization. Choice of acculturation pattern differed based on different factors, namely age, age upon arrival, education, language proficiency, and length of stay in the United States. Age and separation scores were significantly positively correlated, while age and assimilation scores were significantly negatively correlated and there was no correlation between age on one hand and integration and marginalization on the other hand. Age of coming into the United States showed significant negative correlation with integration and assimilation, while it showed significant positive correlation with separation and marginalization. The length of stay of the participants in the United States correlated positively and significantly with integration and negatively with marginalization. The level of education correlated positively and significantly with integration but not with any of the other three acculturation patterns. The proficiency of the participants in the English language correlated positively with integration and assimilation while it correlated negatively with separation and marginalization (Lee and Green, n.d.). Therefore, age is related to lower life satisfaction and well-being in the host country.

Another study was conducted by Najam and Hussain (2015) in Gilgit-Baltistan in Pakistan with the purpose of studying the variation of mental health as a function of gender. A total of 408 participants took part in this study and were required to go through structured interviews, where the instrument used was the Mental Health Inventory. The results showed significant differences in mental health and psychological distress as a function of gender, where women reported higher anxiety and depression levels as compared to the males. There were no major differences however in the positive affect, emotional ties, and life satisfaction between males and females.

A study by Zisberg (2017) was conducted to compare the depression and anxiety levels between: a) recent and veteran Russian migrants living in Israel, b) native Israelis, and c) veteran immigrants from the Middle East. Results showed primarily that recent and older Russian immigrants showed higher anxiety levels than native Israelis and older Middle Eastern immigrants. Higher depression levels were noticed among women than among men in the three immigrant groups and not in the Israeli group. This might be explained by the varying gender roles that allow more emotionality for women and not for men in the three immigrant groups and the value of low emotional expression in the Israeli culture.

A study conducted by Noorbala, Yazdi, Faghihzadeh et al. (2017) in Iran aimed to study the mental health of participants of different ages and both genders. The results showed that mental health dysfunctions increased with age and were more prevalent among women, divorced and widowed individuals, the illiterate, the retired and the housewives. If this can be generalized to refugee populations, it puts many in the at-risk groups for mental health disorders. Another study carried out by Wilson (2011), aimed to examine the relationship between sociocultural adjustment of international students who had moved to the United States as a function of various

demographic variables. The results showed that women had more difficulty adapting to the new environment than men and this appeared in their lower sociocultural adjustment scores, in their lower involvement in social events and in their lesser social skills. Moreover, the older age group (30-35 years) experienced more difficult dealings with the administration than did the younger group (21-24 years).

A study by Janssen-Kallenberg (2017) was conducted in Hamburg and in Berlin and a total of 662 participants between the age of 18 and 65 participated in it. The participants were individuals with Turkish migration backgrounds and were required to undergo face-to-face interviews with the researchers who aimed to study the prevalence of depression among these migrants. Only 1.4% of the participants identified with the German culture as their own, and the rest described themselves as Turkish or German-Turkish. Women, older individuals, and people with low socioeconomic levels reported higher rates of depressive symptoms than others in the sample. Those who had spent more than 30 years in Germany had better diagnosis of depression than first generation individuals who migrated when they were older than 13. Older females were found to be the most at-risk group of suffering from depression.

Therefore, based on the discussed literature, we hypothesized that age is positively correlated with lower levels of psychological well-being and therefore, higher levels of depression. We also hypothesized that females exhibit lower mental health scores and higher depression scores than men.

Language vs. Sociocultural Adjustment

A study by Kang (2006) that was carried out with a sample of 489 Asian Americans ranging in age between 17 and 28 showed that language competence was a better predictor of

adjustment of Asian Americans in America than other factors that were also examined. The materials used in this study were an ethnicity questionnaire, as a tool to measure Acculturation, a self-esteem scale, a perceived stress scale, the Adjustment to College Scale in order to study the psychological and sociocultural adjustment of the participants. The academic performance and the social desirability of the candidates was also tested. The language proficiency questions within the acculturation scale outweighed the questions about other acculturation domains in their prediction of psychological adjustment.

According to Raijman, Semyonov and Geffen (2015), a total of 3952 immigrants aged 27-75 who arrived in Israel after they were 18 participated in a study that aimed to understand the process by which first-generation immigrants acquire the Hebrew language. The participants came from various regions, namely, Ethiopia, the Former Soviet Union, the Middle East, North Africa, Europe and the United States. The languages of origin represented by the sample were: Amharic, Russian, Spanish, English, and French. The participants were asked to fill self-report questionnaires concerning their level of Hebrew proficiency, number of months attending Hebrew classes, having contact with the host culture, age at migration, education level, perception of discrimination, identification with the new society, and so on. The results showed that higher proficiency in the Hebrew language is correlated to contact with the host society, having Israeli friends, the length of stay of the participants in the country, as well as receiving language training prior to moving to Israel. Moreover, those with higher education levels showed higher abilities to learn from daily encounters and achieve better Hebrew proficiency. The participants who identified with the host culture and called themselves 'Israeli' were also more prone to fluency in the Hebrew language. The results differed between participants as a function of the country of origin and the language of origin. For instance, participants from the Middle

East, North Africa, Europe and the States reported better Hebrew proficiency than those coming from Ethiopia and the Former Soviet Union. This was explained by the fact that Ethiopians and citizens of the Former Soviet Union preferred to live in community with their own people, which meant that they did not need to use the Hebrew language as much as others who were dispersed in the Israeli society. The higher illiteracy levels among Ethiopians could partially also explain the lower Hebrew proficiency levels. Moreover, Spanish and French speakers were able to attain higher Hebrew proficiency than Russian, English, and Amharic speakers, especially because they comprised the smallest community in Israel which prompts them to learn Hebrew in order to get by. Moreover, participants who have any knowledge of Arabic would have an easier time learning the Hebrew language as Arabic is the language that is closest linguistically to Hebrew (Raijman et al., 2015). Based on those findings, we hypothesized that German language proficiency correlated with higher sociocultural adjustment scores.

Therefore, based on all of the above discussed literature, the study examined the following hypotheses:

Hypothesis 1: Higher levels of language proficiency are positively correlated with higher levels of sociocultural adjustment.

Hypothesis 2: Age and symptoms of depression are positively correlated.

Hypothesis 3: Syrian female refugees experience depression more than men.

Hypothesis 4: Concerning the acculturation strategies:

A: integration is positively correlated with sociocultural adjustment and psychological well-being;

B: assimilation is positively correlated with sociocultural adjustment and negatively correlated with psychological well-being;

C: separation is negatively correlated with sociocultural adjustment and with psychological well-being.

Chapter 3

Method

This chapter is an overview of the research methodology that was used to carry out this study. It includes the description of the sample population, the procedure used to administer the tests, a detailed description of the instruments used, an explanation of the data analysis and finally, the ethical considerations that were taken into account.

Participants

The participants chosen for this study were Syrian refugees who had come to Germany following the Syrian war that started in 2011. The study did not include other refugees from other nationalities or Syrians who have come for economic reasons over 6 years ago to Germany. More specifically, the sample was a purposeful convenient sample as it targeted only Syrians residing in the city of Stuttgart in Germany. As can be seen below in Table 1, those who participated in the study were 214 Syrians (N= 214), of which 129 were males and 85 were females. The participants were mainly consent adults whose age ranged between 14 and 70 with an average age of 32. Only 14 participants were teenagers and they requested to participate in the presence of their parents, and they did. However, no teenagers were approached by the researcher on their own. All the participants were naturally Syrians of which 185 distinguished themselves as Arabs and 29 as Kurds. The researcher was not able to carry out the study with Kurds who did not speak Arabic as a second language. Of the participants, 189 were Muslims, 5 were Christians, 2 were Yazidis, and 18 did not claim to embrace any religion. Concerning the marital status of the participants, 72 of those approached were single, 131 were married, 5 were

divorced, and 6 were widowed. Sixty-eight participants lived in their private homes, while the rest were still residing in the refugee establishments (146 individuals).

Table 1
Frequency and percentages of Demographics (N=214)

Variable	F	%
<i>Gender</i>		
Male	129	60.3
Female	85	39.7
<i>National Identity</i>		
Arab	185	86.4
Kurdish	29	13.6
<i>Religion</i>		
Muslim	189	88.3
Christian	5	2.3
Yazidi	2	0.9
None	18	8.4
<i>Marital Status</i>		
Single	72	33.6
Married	131	61.2
Divorced	5	2.3
Widowed	6	2.8
<i>Place of Residence</i>		
Refugee Establishment	146	68.2
Private	68	31.8
<i>Age Groups</i>		
14-17	14	6.5
18-25	60	28
26-35	60	28
36-45	51	23.8
46-55	25	11.7
>56	4	1.9
<i>Time Span in Germany</i>		
<10	15	7
11-20	20	9.3
21-30	137	64
31-40	31	14.5
>41	11	5.1

Materials

The first section of the questionnaire package comprised of the participant consent form (see Appendix A) followed by the demographics questionnaire which covered the questions regarding gender, age, religion, nationalistic belonging (Arab or Kurdish), marital status, number of kids, date of arrival in Germany, level of education attained in Syria, German language level reached according to the Common European Framework of Reference for Languages (CEFR), other languages they speak (mainly English or French), place of residence in Germany, work status in Germany, work experience in Syria, whether the person got any help to find a job, and whether their previous work experience or degrees are acknowledged in Germany (see Appendix B). Moreover, a set of questions about the participant's perceived experience in Germany were added at the end of the demographic section. Although no hypotheses were formulated based on any of these questions, they were added for control purposes and the possibility of future research (see Appendix C). They were also found to be beneficial in the interpretation of the results.

Three psychological tests namely, the Acculturation Attitudes Scale (AAS-16), the revised Sociocultural Adjustment Scale (SCAS-R), and the Mental Health Inventory (MHI-18) followed the demographic section in the questionnaire package (see Appendices D, E, & F). These tests are described in details in the section below. It is important to note here that all the materials used in this study were translated into Arabic and then back translated to English and all the appendices include the English as well as the Arabic versions.

CEFR for Languages. The Common European Framework of Reference for Languages produced by the Association of Language Testers in Europe (2011), is the method of depicting

language proficiency level that is currently widely used throughout Europe. It divides the language proficiency progress into a ladder that ranges from A1 to C2: {A1, A2, B1, B2, C1, C2}, with A1 being the first level and C2 being the most advanced one. Refugees who come into Germany are registered in language courses soon after arrival and are aware of this naming of language proficiency levels. Therefore, the participants in the study were able to directly state the language level that they have reached. The German schools started alphabet classes for people who have no knowledge of the Latin letters. Also, the checklist of language abilities that is found in the Appendix G can be used with people who are not attending language classes anymore or who never got the chance to attend any language class, for certain familial or health reasons, and therefore they can automatically be placed in one of the levels.

This method of language proficiency evaluation uses a set of descriptions of the linguistic capabilities of a person at each level of the ladder. These descriptions are verbalized in ‘Can do’ sentences to make it more tangible for language learners. For instance, one description of the A1 language level is the following: ‘Can understand and use familiar everyday expressions, can introduce oneself and ask basic questions, and can interact in simple ways if the person talks slowly and clearly.’ While the descriptive ‘Can do’ statements of the C2 level sound something like this: ‘Can understand with ease virtually everything heard or read and can summarize information from different spoken and written sources, reconstructing arguments and accounts in a coherent presentation...’ (Council of Europe, 2011).

Acculturation Attitudes Scale (AAS-16). According to Kim (2009), the AAS was developed originally by Kim (1988) in English and Korean to study the acculturation of Korean Canadians. It comprised of 14 different areas of life with 56 questions. It was used by Kim (2009) in an attempt to study the acculturation of 78 Korean Americans and the Cronbach’s alpha retrieved

were 0.84 for Integration, 0.84 for Assimilation, 0.77 for Separation, and 0.72 for Marginalization. Kim (1988) had already established construct, concurrent, and convergent validity of the measure. According to Schmitz and Berry (2011), the Acculturation Attitudes Scale was used again as a measurement tool in the International Comparative Study of Ethnocultural Youth, this time comprising of 24 items, and involved questions reflecting various aspects of life, namely, marriage, friendships, social activities, customs and traditions, and music preference. The AAS-24 was administered on 1799 individuals in Germany, of which about half were immigrants and the other half were German citizens. The immigrants were asked to fill the AAS questionnaire according to how they prefer to acculturate in Germany, while the locals were asked to fill the AAS according to how they think or expect the immigrants to acculturate. The results showed that AAS had good internal consistency. The Cronbach's alphas obtained from the immigrants group were 0.70 (Integration), 0.78 (Assimilation), 0.72 (Separation), and 0.62 (Marginalization) and those of the German group were 0.88, 0.83, 0.83, and 0.81, respectively. Factor analysis showed the low correlation between the four acculturation attitudes and therefore their independency, and additionally, the AAS was found to be effective when used with various cultural backgrounds.

According to Schmitz and Schmitz (2012), the shorter German version of the AAS which comprised of 16 items, also touching on tradition maintenance, friends, social activities, marriage, music, and language was administered on 414 immigrants who had been living in Germany for varying number of years. The correlation between emotional intelligence and choice of acculturation styles as well as other factors were examined in this study. The study yielded interesting results and showed again that the AAS-16 has high internal consistency, with the Cronbach's alphas ranging from 0.62 to 0.88.

Revised Sociocultural Adjustment Scale (SCAS-R). According to Ward and Kennedy, 1999, the Sociocultural Adjustment Scale was inspired by Furnham and Bochner's (1982) 40-item Social Situations Questionnaire and developed by Searle and Ward (1990) into a 16-item scale when studying the cross-cultural transition of Malaysian and Singaporean students in New Zealand. The questionnaire required the participants to indicate the amount of difficulty experienced when performing certain activities or in certain social areas. Six cross-sectional samples were gathered with sample sizes that range from 84 to 191 each with a length of stay that ranged from around 3-100 months. The study indicated good internal reliability of SCAS with alpha values ranging from 0.75 to 0.91. Evidence of construct validity was also found by the significant correlations between sociocultural adjustment and psychological adjustment (0.38), as measured by the Zung Self-rating Depression Scale.

The Revised Sociocultural Adjustment Scale was developed by Wilson (2013), a 21-item self-report inventory, measuring 5 factors of sociocultural adjustment: Interpersonal Communication, Academic/ Work Performance, Personal Interests & Community Involvement, Ecological Adaptation, and Language Proficiency, where the participants need to indicate their level of competency in a certain social area or behavior rather than their difficulty in that area. The study carried out by Wilson involved 316 participants living in New Zealand, who were immigrants, international students, refugees, and spouses of expatriates. A 54-item pool was generated and 21 items came out after factor-analysis was run. The internal consistency of these factors was found to be relatively high and the Cronbach alphas are designated here: Interpersonal Communication (0.89), Academic/ Work Performance (0.86), Personal Interests & Community Involvement (0.76), Ecological Adaptation (0.71), and Language Proficiency (0.90). The overall internal consistency of SCAS-R was 0.92. Construct validity tests were also

administered and showed a high and negative correlation between the original SCAS and SCAS-R. A large and positive correlation was also found between SCAS-R and SAS (Subjective Adjustment Scale), a positive correlation with SWLS (The Satisfaction with Life Scale), and a negative correlation with ZSDS (Zung Self-Rating Depression Scale).

Mental Health Inventory (MHI-18). The MHI was developed in 1983 by Veit and Ware for the Rand Health Insurance Experiment in the United States. The MHI-18 is comprised of 18 questions about the emotional experience of the participant in the past 4 weeks. It covers a wide range of positive and negative emotions. The answers range from ‘All of the Time’ to ‘None of the Time’. The MHI-18 has 4 subscales: Anxiety, Depression, Behavioral Control, and Positive Affect, and one total score, where higher scores indicate better mental health. There are 8 items in MHI-18 that are reverse scores: 1, 3, 5, 7, 8, 10, 13, and 15.

According to Ritvo et al. (1997), the MHI-18 administered to 130 Multiple Sclerosis patients produced very low scores as compared to the normative population scores produced in 1983 by Veit and Ware, which directed the focus of the clinicians to the emotional and mental health of MS patients. Therefore, the MHI-18 is now included in the Multiple Sclerosis Quality of Life Inventory Manual. The MHI-18 has been refined since its development in 1983 through a series of reliability and validity studies. During the National Health Insurance Study, the MHI was administered to around 5000 individuals from different cities in the US. It was found to correlate highly with other mental health assessment tools.

According to Meybodia et al (2011), the Farsi version of the MHI-18 was administered to 300 students from the University of Tehran and was tested for reliability and validity. It was found to correlate highly with the General Health Questionnaire (-0.75). The negative correlation is due to the fact that MHI assesses psychological well-being while GHQ assesses psychological

distress and this indicates high concurrent validity. The Cronbach's alpha coefficients for the sub-scores and the total score were also tested to examine internal consistency of the MHI-18 and the results were the following: 0.84 (anxiety), 0.83 (depression), 0.63 (behavioral control), and 0.85 (positive affect), and that of the total score was 0.93 (split-half method). These results indicate that the MHI-18 is internally consistent and is valid to be used in the Iranian population as an indicator of psychological well-being.

Procedure

The participants were approached and invited to participate in this study through the help of social workers who are in charge of the refugees residing in governmental refugee establishments in the city of Stuttgart. In addition to obtaining a consent form from the administration of these refugee residences, each participant was also briefed on the purpose of the study after which they chose either to participate or not. Those who gave their consent, were then asked to fill a self-report demographics sheet that also included questions about their experience in Germany, as well as the three psychological tests.

It is important to note here that the social workers in correspondence with their superiors welcomed the study and even expressed interest in the results. These social workers also gave the researcher access into other refugee establishments around Stuttgart, 12 in total, in addition to sharing the contacts of some Syrians who had already moved out into private housing. The researcher met the 214 participants in 12 refugee establishments, in private houses, in 2 German language schools, as well as in random street encounters.

Most of the people approached accepted to participate in the study. A few declined because of previous engagements. The fact that the researcher spoke Arabic played a significant

role in the friendliness and openness of the Syrians to participate in the study. Hospitality and sharing life experiences often extended the individual meetings beyond the assigned 30 minutes.

Most of the missing data resided in the only three qualitative, open-ended questions, and the rest were mostly observed in the section about the experience of the participants in Germany. There was only a small percentage of missing data in the three psychological tests and those were easily accounted for by other questions that ask about the same variant. The researcher discarded a few question sheets that had more than 1% missing values or that had variables that did not apply to our current study, for instance, Syrians who were in Germany since 1990.

The participants mostly were able to fill out the survey themselves, but some requested help because of their relatively low education level attained in Syria or because of their age. The questions were all translated into Arabic to cater to the language proficiency of the Syrians. The validity of the translation was tested through running a back-translation carried out by a Lebanese PHD student, and the efficacy of the questions was also tested through the pilot study that was performed with 39 participants. Following the pilot study, the researcher made some changes in the wording of a few questions that the participants were regularly asking about and was not obliged to make any other major changes in the overall question set.

Data Analysis

After discarding about 4 filled out questionnaires, the papers were numbered from 1 to 214 and the data were introduced into SPSS Statistics Program for data analysis. Descriptive statistics was first run to get a primary overview of the gathered data. This was followed by running a factor analysis, reliability checks, correlation analyses, and t-tests to study the various relationships between the independent and the dependent variables.

As mentioned in Chapter 1, the independent variables in this study are gender, age, German language proficiency, and acculturation strategies adopted by Syrian refugees. On the other hand, the dependent variables are sociocultural adjustment and psychological well-being of the Syrian refugees. The correlation analyses that were carried out aimed to study the hypotheses already stated previously. Therefore, correlation analysis was done to examine how the level of German language attained related to the sociocultural adjustment of the participants. Correlation analysis was also used to study the relationship between age and depression symptoms. Moreover, t-test was carried out to study how depression varies as a function of gender. Furthermore, the relationships between the various acculturation subscales and sociocultural adjustment as well as general mental health scores were studied through correlation analyses to reach conclusions about the stated hypotheses. All of these correlations were studied at the 0.05 significance level and sometimes also at the 0.01 significance level. A few more correlation analyses and t-tests were performed to discover additional significant correlations between various other variables mentioned in the questionnaires. Multiple regression analysis was also run as an additional analysis in order to examine which of the independent variables mostly predicted the psychological well-being and the sociocultural adjustment of the participants.

Ethical considerations

Before administering the study, the researcher applied for IRB clearance from the Ethics Committee at Haigazian University and was granted approval to proceed. Moreover, prior to entering any refugee establishment, the researcher approached the social workers and shared with them the purpose of the study as well as the necessary needed explanatory documents. Finally, participants were asked to fill a consent form before filling out the questionnaires, and

most of them did. However, many preferred not to put their names even on the consent forms, even though they gladly and openly participated in the study.

Chapter 4

Results

The purpose of this study is to examine a set of independent variables, namely, age, gender, language proficiency and acculturation strategy in relation to two separate dependent variables, sociocultural adjustment and psychological well-being among the Syrian refugees in Stuttgart, Germany. In this chapter, we will present the scale properties, the reliability findings, then we move on to test the proposed hypotheses by using the Statistical program SPSS, for data analysis.

Scale Properties

Factor analysis conducted for the AAS-16 scale divided the items of the Acculturation Attitudes Scale into 5 factors, instead of 4, based on the emerged loadings. The clear factors were Integration, Assimilation, and Separation, while the other two factors comprised of arbitrary items from the subscales. Therefore, the items for Marginalization did not constitute a separate factor. This is in line with a previous study by Schwartz and Zamboanga (2008) who conducted a psychological experiment with 436 Hispanic Americans and their results yielded 6 factors, including integration, assimilation, and separation; marginalization, however, was not one of them. Pilar and Udasco (2004) also examined the lack of validity in the marginalization scale and questioned the very concept of it, where they challenged the idea that a minority group in a host country can be totally devoid of any cultural influence, whether it be their own or that of the host culture. This idea was also supported by Fox, Merz, Solórzano & Roesch (2013). One of the marginalization items in this study appeared to contribute to the integration scale with a

reverse influence, and another contributed to the integration and the separation subscales in almost equal values.

Reliability Testing

The reliability coefficients were calculated for each subscale and the analysis yielded a Cronbach's alpha of 0.725 for integration where the items AAS4 and AAS11 were eliminated to improve the reliability. Separation yielded a relatively low Cronbach's alpha of 0.506 following the elimination of item AAS3. The low Cronbach alpha of the separation subscale has to be taken into consideration while interpreting the data.

Also, the reliability coefficient of the Behavior Control subscale was found to be 0.671, after the elimination of items MHI5_reverse and MHI8_reverse. In table 2 below is a presentation of the current and previous reliability coefficients of the subscales of the Acculturation Attitudes Scale as well as the subscales and the total scales of the Sociocultural Adjustment Scale and the Mental Health Inventory. We notice that the reliability coefficients of the current study are generally lower than those of the previous studies.

Table 2*Previous and Current Cronbach's Alphas of the various Scales and Subscales*

Scale or Sub-scale	Previous Cronbach's Alpha (average)	Current Cronbach's Alpha
AAS	-	-
AAS_Integration	0.700	0.725
AAS_Assimilation	0.780	0.668
AAS_Separation	0.720	0.506
SCAS_Total	0.920	0.889
SCAS_Interpersonal Communication	0.890	0.732
SCAS_Academic Work Performance	0.860	0.688
SCAS_Personal Interests & Community Involvement	0.760	0.661
SCAS_Ecological Adaptation	0.710	0.532
SCAS_Language Proficiency	0.900	0.835
MHI_Total	0.930	0.907
MHI_Depression	0.830	0.849
MHI_Anxiety	0.840	0.764
MHI_Behavioral Control	0.630	0.671
MHI_Positive Affect	0.850	0.740

Hypotheses Testing

Hypothesis 1: Higher levels of language proficiency are positively correlated with higher levels of sociocultural adjustment.

A Pearson correlation was calculated to examine the relationship between German language proficiency level and sociocultural adjustment. A positive correlation was found between the two variables ($r=0.394$; $p=0.000$), and the correlation was found to be significant at the 0.01 level. Therefore, the hypothesis is confirmed as seen in Table 3 below.

Table 3

Correlation Matrix between the various independent and dependent variables: German language level, age, acculturation strategies, sociocultural adjustment, mental health and depression

		SCAS_Total	MHI_Total	MHI_Depression
German language level reached	Pearson Correlation	0.394**	-	-
	Sig. (2-tailed)	0	-	-
	N	214	-	-
Age of the Participant	Pearson Correlation	-	-0.011	0.046
	Sig. (2-tailed)	-	0.874	0.505
	N	-	214	214
AAS_Integration	Pearson Correlation	0.151*	0.136*	0.119
	Sig. (2-tailed)	0.027	0.048	0.083
	N	214	214	214
AAS_Assimilation	Pearson Correlation	0.254**	-0.025	-0.097
	Sig. (2-tailed)	0	0.713	0.155
	N	214	214	214
AAS_Separation	Pearson Correlation	-0.123	-.141*	-0.102
	Sig. (2-tailed)	0.072	0.039	0.137
	N	214	214	214

*. Correlation is significant at the 0.05 level (2-tailed).

**. Correlation is significant at the 0.01 level (2-tailed).

Hypothesis 2: Age and symptoms of depression are positively correlated.

A Pearson correlation was computed to examine the relationship between age and depression. Results showed no correlation between age and depression, which means that this hypothesis is not confirmed as can be seen in Table 3.

Hypothesis 3: Syrian female refugees experience depression more than men.

An independent t-test was administered to compare the mean depression levels of males and females in this sample. With depression means of $M=14.78$ ($SD=4.662$) and $M=14.47$

(SD=4.839) for males and females, a t value of $t(212)=0.461$ and a significance value of 0.646 indicated that the difference in the depression levels is not significant between males and females, and hence, this hypothesis was not confirmed.

Hypothesis 4: Concerning the acculturation strategies:

A: integration is positively correlated with sociocultural adjustment and psychological well-being; B: assimilation is positively correlated with sociocultural adjustment and negatively correlated with psychological well-being; C: separation is negatively correlated with sociocultural adjustment and with psychological well-being.

A Pearson correlation was computed to examine the relationship between integration, sociocultural adjustment, and well-being. The results showed that integration was positively and significantly correlated with sociocultural adjustment ($r=0.151$; $p=0.027$) and mental health ($r=0.136$; $p=0.048$), which confirms part A of the fourth hypothesis. Assimilation was found to be positively and significantly correlated with sociocultural adjustment ($r=0.254$; $p=0.000$) and negatively but insignificantly correlated with mental health, therefore, part B of this hypothesis were only partially confirmed. Finally, results showed that separation was negatively and insignificantly associated with sociocultural adjustment and negatively and significantly correlated with mental health ($r=-0.141$; $p=0.039$), which also confirms part C of the hypothesis only partially. These results are presented in Table 3 above.

Additional Findings

Multiple regression analysis was performed to examine the predictability of sociocultural adjustment as a dependent variable. The results are seen in Table 4 below.

Table 4*Regression Coefficients of sociocultural adjustment as the dependent variable*

Model	Unstandardized Coefficients		Standardized Coefficients	t	Sig.
	B	Std. Error	Beta		
(Constant)	68.96	11.452		6.022	0
Age	-0.036	0.074	-0.034	-0.488	0.626
Length of stay	-0.182	0.09	-0.138	-2.027	0.044
Education in Syria	0.358	0.211	0.116	1.695	0.092
German language level	2.022	0.57	0.313	3.549	0
AAS_Integration	1.154	0.579	0.136	1.994	0.048
AAS_Assimilation	0.829	0.268	0.208	3.095	0.002
¹ AAS_Separation	-1.21	0.545	-0.149	-2.222	0.028
AAS_Marginalization	-0.568	0.622	-0.066	-0.912	0.363
No. of German friends	0.232	0.121	0.125	1.92	0.056
Gender	-3.74	1.731	-0.157	-2.16	0.032
Place of residence	1.317	1.748	0.051	0.754	0.452
Work Status	-0.307	1.09	-0.02	-0.282	0.779
Perceiving Discrimination	-0.538	1.333	-0.026	-0.404	0.687
Cultural Distance	-2.257	1.437	-0.097	-1.571	0.118

Looking at the Beta values as well as the values of significance shows that the length of stay negatively contributes to sociocultural adjustment by 13.8% with a significance value of $p=0.044$. The German language level is found to contribute positively to sociocultural adjustment by 31.3% at a significance value of $p=0.000$. Integration is found to contribute to sociocultural adjustment by 13.6% with a significance value of $p=0.048$. Assimilation as a choice of

acculturation was found to contribute to sociocultural adjustment by 20.8% with a significance value of $p=0.002$. Separation was found to contribute negatively to sociocultural adjustment by 14.9% with a significance value of $p=0.028$. The number of German friends that the participants had contributed to sociocultural adjustment by 12.5% with a significance value of $p=0.056$ (not significant). Finally, gender contributed negatively to sociocultural adjustment by 15.7% with a significance value of $p=0.032$. Therefore, biggest predictors of sociocultural adjustment according to this analysis are German language levels (31.3%) and assimilation (20.8%). As can be seen in Table 5 below, the items chosen in the regression analysis contribute by 37% to sociocultural adjustment.

Table 5

Model Summary of the Regression Analysis of sociocultural adjustment as the dependent variable

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate	Change Statistics				
					R Square Change	F Change	df1	df2	Sig. F Change
1	.609 ^a	0.37	0.32	9.729	0.37	7.272	14	173 ^a	0

Similarly, another regression analysis was carried out to examine the predictability of mental health as the dependent variable. The results can be seen in Table 6 below.

Table 6
Regression Coefficients of mental health as the dependent variable

Model	Unstandardized Coefficients		Standardized Coefficients	t	Sig.
	B	Std. Error	Beta		
(Constant)	8.234	15.963		0.516	0.607
Gender	3.595	2.337	0.122	1.538	0.126
Age	0.153	0.102	0.118	1.501	0.135
Time Span in Germany	-0.177	0.121	-0.108	-1.459	0.146
Education level in Syria	-0.303	0.291	-0.08	-1.044	0.298
German language level	-0.051	0.805	-0.006	-0.064	0.949
Place of residence	6.308	2.372	0.198	2.66	0.009
Work Status	1.93	1.448	0.102	1.333	0.184
Perceiving Discrimination	-2.207	1.802	-0.085	-1.225	0.222
1 Physical and health needs covered	-1.585	1.137	-0.099	-1.395	0.165
Receiving psychological help	-0.78	2.909	-0.019	-0.268	0.789
Communication difficulties with Germans	-0.593	2.314	-0.02	-0.256	0.798
Difficulty adjusting to new culture	8.578	2.179	0.287	3.936	0
No. of German friends	0.081	0.166	0.036	0.487	0.627
SCAS_Total	0.404	0.103	0.327	3.924	0
AAS_Integration	0.673	0.781	0.064	0.862	0.39
AAS_Separation	0.333	0.752	0.033	0.442	0.659
AAS_Marginalization	0.743	0.833	0.07	0.893	0.373
AAS_Assimilation	-0.563	0.365	-0.116	-1.543	0.125

The results showed that the place of residence (whether in a refugee establishment or in a private residence) contributed to up to 19.8% to the mental health of the participants with a significance value of $p=0.009$. Moreover, total sociocultural adjustment scores contributed to mental health by 32.7% with a significance value of $p=0$. Finally, experiencing no difficulty in adjusting to the new culture contributed to mental health by 28.7% with a significance value of

$p=0$. As can be seen in Table 7 below, the items chosen for this regression analysis contribute to mental health by around 30%.

Table 7

Model Summary of the Regression Analysis of mental health as the dependent variable

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate	Change Statistics				
					R Square Change	F Change	df1	df2	Sig. F Change
1	.553 ^a	0.306	0.23	12.771	0.306	4.039	18	165 ^a	0

Moreover, some significant additional results were calculated and reported in order to be studied more accurately in future studies. First, participants mostly chose Integration (M=8.33 with 2 items) as their choice of acculturation, followed by assimilation (M=10.82 with 4 items) and separation (M=4.63 with 3 items). Second, a list of significant correlations was found between the variables and is presented in Table 8 below.

Table 8

Correlation Matrix between age, education level, knowing other languages, German language level, sociocultural adjustment, mental health and depression

		MHI_Depressio n	MHI_Tota l	SCAS_Tota l	German languag e level reached
Age of the Participant	Pearson Correlation	0.046	0.017	-.184**	-. 0.395**
	Sig. (2- tailed)	0.505	0.809	0.007	0
	N	214	214	214	214
Other languages the person uses besides Arabic	Pearson Correlation	0.046	-0.001	.176**	0.292**
	Sig. (2- tailed)	0.506	0.993	0.01	0
	N	214	214	214	214
Grade or level reached in Syria	Pearson Correlation	.141*	0.015	0.122	0.213**
	Sig. (2- tailed)	0.039	0.832	0.074	0.002
	N	214	214	214	214
SCAS_Total	Pearson Correlation	.287**	.327**	1	.394**
	Sig. (2- tailed)	0	0		0
	N	214	214	214	214

** . Correlation is significant at the 0.01 level (2-tailed).

* . Correlation is significant at the 0.05 level (2-tailed).

Third, an independent t-test was conducted to examine the mean difference in German language level between males and females. The results showed a significant difference between the two groups where men attained higher language levels (M=3.61; SD=1.641) than the females

($M=1.80$; $SD=1.696$). Also, sociocultural adjustment was found to be significantly different between males and females, where males reported higher levels of sociocultural adjustment ($M=75.47$; $SD=10.932$) than females ($M=68.39$; $SD=12.370$). The results are presented below in Table 9.

Table 9

Independent Samples t-Test comparing the difference in German Language level attained and sociocultural adjustment as a function of gender

	t-test for Equality of Means				
	t	df	Sig. (2-tailed)	95% Confidence Interval of the Difference	
				Lower	Upper
German language level reached	7.802	212	0	1.354	2.27
SCAS_Total	4.401	212	0	3.911	10.258

Furthermore, another independent t-test was conducted to measure the relationship between place of residence (refugee establishment or private housing) and mental health. A t-value of $t(212) = -2.792$ with a significance value of 0.006 implied that the difference between the means is significant at the 0.05 level. Therefore, there is a significant difference in the means of the mental health calculated, where participants living in private housing reported higher mental health scores ($M=72.71$; $SD=13.092$) than those living in the refugee establishments ($M=66.44$; $SD=16.203$).

Chapter 5

Discussion

The purpose of this study was to examine the impact of age, gender, host language acquisition and acculturation strategy on sociocultural adjustment and well-being among Syrian refugees in Stuttgart, Germany. In this chapter, we discuss the results presented in Chapter 4 and how they connect to previous studies.

The first hypothesis stated that the German language level of the refugees in the study would be positively correlated with their reported sociocultural adjustment. This hypothesis was confirmed and it is in line with previous research. For instance, Swami, Arteche, Chamorro-Premuzic, and Furnham (2010) conducted a study on Chinese and Malaysian immigrants living in the UK and concluded that language proficiency was correlated with better sociocultural adjustment level and a better overall experience in the host country. Moreover, Kang (2006) found language competence to be a better predictor of adjustment than acculturation strategies as seen in a variety of Asian groups living in the United States. This is in line with the current study where regression analysis showed that German language levels predicted the sociocultural adjustment of participants by 31%. Watkins et al. (2012) also confirm the critical role that language played in allowing the adjustment of the Burmese refugees in Australia, where language was found to be the biggest barrier to adjustment. It is important here to note that around 40% of the Syrian refugees who participated in the current study reported that language learning is the most difficult obstacle they were experiencing in adjusting to life in Germany. Others reported that dealing with paper work and making German friends was the most difficult for them, which is also related to German language proficiency. According to Raijman, Semyonov, Geffen (2015) who conducted a study on immigrants in Israel reported that higher

proficiency in the Hebrew language was connected with higher contact with locals, having friends, and experiencing better adjustment and belonging. Raijman et al. (2015) also noted that higher educational levels of the immigrants was related with better language acquisition levels and better adjustment. This might explain some of the adjustment difficulties faced by the Syrians in Germany, where 20% of them did not receive any schooling beyond Grade 5 and around 50% left school after Grade 9, according to the current study. Finally, according to Esser (2006), living in ethnically homogeneous communities hinders immigrants from learning the host language and experiencing involvement in the host society. This applies to 68% of the Syrians in this study who have lived in refugee establishments with other Arabs and international refugees for more than two years and therefore, did not practice the German language with Germans but continued to speak their ethnic languages; consequently, this hindered their sociocultural adjustment.

The second and third hypotheses stated that older age would be correlated with higher levels of depression and that females would experience higher depression rates than men. These two hypotheses were not confirmed by the current study, and hence were not in line with various previous, such as Janssen-Kallenberg et al. (2017), Agrawal & Jaiswal (2013), Polek et al. (2008), Göregenli et al. (2016), Detzner et al. (n. d.), Tabari et al. (2017), Najam & Hussain (2015), and Noorbala et al. (2017). These referenced studies were mainly conducted on immigrants and not on refugees as is the case in this study. One can argue that the refugees' state of mind differs from that of immigrants who resettle willingly into a new culture, and therefore, other factors could be at work contributing more significantly to the depression and mental health of the refugees, regardless of age and gender. For instance, Smeekes, Verkuyten, Celebi, et al. (2017) conducted a study with a total of 361 Syrian refugees living in Turkey. The study

revealed that neither age nor gender predicted depression scores of the participants. Only anxiety was found to be higher in females. However, maintaining social contact and social identity after migration was a major factor predicting greater life satisfaction and acting as a protective factor against depression. Moreover, a study by Schweitzer, Melville, Steel, & Lacherez (2006) conducted with Sudanese refugees living in Australia showed that age did not predict the mental health of the participants. On the other hand, social support from the individual's own ethnic community, family separation, employment status, as well as pre- and post-migration stressors predicted higher depression. The effect of pre- and post-migration experiences on mental health was also stressed by Lacroix and Sabbah (2011).

Moreover, in a study conducted on 443 refugees and asylum seekers in Italy, Aragona et al. (2012) concluded that neither gender nor age played a role in whether the participants showed more or less symptoms of Post-Traumatic Stress Disorder (PTSD); in fact, the percentage of those who experienced PTSD differed significantly from those who did not on the levels of post-migration living difficulties experienced in the host country. The most common post-migration living difficulties experienced were, having no permission to work (38.6%) and living in low economic statuses (34.5%). Relating this to our study, we can conclude that although the Syrian refugees live on 'safe' German soil, they continue to hear the news of war, destruction of property, and death of loved ones even several years after their own displacement, and this adds to the other post-migration stressors that they experience. Moreover, a total of 60% of the Syrian refugees, who participated in the current study had jobs in Syria and were responsible for their own income; only 4.5% of the participants are currently employed in Germany and this alone is a big stressor. Furthermore, being refugees in Germany, and having to learn the language first, puts refugees, and especially men in this case, who were the main source of income in their home

country, in a much weaker and lower social and economic status than what they belonged to in Syria. This is a major point that contributes to insignificant difference in depression rates between Syrian men and women who resettled in Stuttgart. This can be confirmed by Feyera et al. (2015), who conducted a study on 847 Somalian refugees in Ethiopia. The results showed that depression rates were significantly related to continued socioeconomic difficulties and stressful life conditions in the refugee camps as compared to refugees who resettled into homes in Toronto, Canada. In this context, Somalian women showed higher depression rates than the men in the Ethiopian refugee camps. However, Ethiopian refugee men and women who resettled in Toronto experienced similar rates of depression in comparison, and this was explained due to the drop in the social and economic status and the lack of work opportunities for men in Toronto. Also, experiencing post-migration stressors was found to enhance mental health issues in refugees, especially when related to the shelter conditions in the host country and not having a home. The same can be said about the Syrian refugees in Stuttgart who struggle with lack of private housing and complain about their continued residence in the refugee establishments for long periods of time. This is in line with our regression analysis results that showed the place of residence to contribute up to 20% to the mental health of the refugees, where those living in private housing enjoyed better mental health than those living in refugee establishments.

Moreover, the regression analysis also showed that ‘having no difficulty in adjusting to the German culture contributed by 29% to mental health. And this is in line with a study by Zisberg (2017) that involved recent and veteran Russian immigrants in Israel, Middle-Eastern veteran immigrants, and Israeli locals. The results showed that both recent (young) and veteran (old) Russians experienced more depression than the veteran Middle-eastern immigrants. These results put less weight on age as a predictor of depression and more weight on cultural distance

as a stronger predictor, where Russians experience bigger cultural distance living in Israel than Middle-Eastern immigrants. This might also explain the results of this current study where 62% of the participants reported that they perceive the German and the Syrian cultures to be very different, while 36% reported that they can find some similarities, and 1% only reported the two cultures to be similar.

Finally, regression analysis of the current study also showed that sociocultural adjustment contributed up to 32% of the well-being of the participants. The additional findings showed that a significant difference in sociocultural adjustment rates exists between males and females, where males enjoyed higher sociocultural adjustment levels than females. Moreover, there was a negative correlation between age and sociocultural adjustment. Therefore, although gender and age were not found to contribute directly to depression and well-being rates, however, they seem to contribute indirectly through their direct relationship with sociocultural adjustment.

Part A of the fourth hypothesis stated that integration is positively correlated with sociocultural adjustment and well-being. Correlation analysis confirmed this first part of the hypothesis where integration was found to be positively and significantly correlated with sociocultural adjustment as well as with mental health. This is in line with numerous previous studies that confirm these findings (Eshel & Rosenthal-Sokolov (2000), Abu-Rayya (2007), Berry et al. (2006), and Schmitz & Schmitz (2012)). It was also found in the current study that integration was the most favorable mode of acculturation chosen by the participants, and this is again in line with previous studies that show integration to be the most preferred strategy of acculturation, as it requires the least amount of acculturative stress and consequently gives the best psychosocial outcomes (Kim (2006) and Lee & Green (n.d.)). It is worth noting here that choosing integration as a strategy of acculturation in fact expresses a desire to 'fit in', as worded

out by Yu and Wang (2011) but translating this desire into action is affected by the environment and the place of residence. According to Kosic (2002), those who practice integration enjoy higher rates of relationships with the host society, and they mostly live in ethnically mixed communities where they can interact with the host community, according to Berry et al. (2006). Therefore, these results prompt us to advise refugees to adopt integration as an acculturation attitude, however, whether they are able to practice integration in reality depends on the place of residence and the level of contact with the host community.

Part B of the fourth hypothesis stated that assimilation is positively correlated with sociocultural adjustment and negatively correlated with well-being. The results of this study confirmed this part of the hypothesis only partially, where assimilation was found to be positively and significantly correlated with sociocultural adjustment, however, it was found to be negatively but insignificantly correlated with mental health. The positive correlation between assimilation and sociocultural adjustment is in line with previous studies that showed similar results (Berry et al. (2006)). However, the relationship between assimilation and well-being was controversial as was discussed above in Chapters 1 and 2. Different factors seem to play a role in the mental health consequences of assimilation. One major factor was found to be cultural distance between the host culture and culture of origin, where the greater the cultural distance, the more it requires sociocultural changes by the individual and this exerts more acculturative stress on the person's mental health, and therefore, assimilation in this case is connected with higher depression rates (Asyat & Malcarne (2008), Göregenli et al. (2016), and Stephens (2016)). Sixty-two percent of the Syrian refugees taking part in this study reported that they perceive the German culture to be very different from the Syrian one. Therefore, this prompted us to expect a significant negative correlation between assimilation and mental health. However,

the insignificant negative correlation points our focus to other factors that might also be impacting these results, namely, perceiving discrimination from the host society. According to Asyat and Malcarne (2008) and Stephens (2016), perceiving discrimination is another factor that contributes to depression and lower well-being within the assimilation model, due to the fact that getting in close contact with the locals through assimilation gets one to recognize discrimination more clearly. In our current study, only 5% of the participants reported perceiving discrimination from locals, while 60% reported not perceiving any discrimination, and 32% reported partially perceiving discrimination, and mainly from other foreigners in Germany. Therefore, this very low perception of discrimination might explain why in this study assimilation correlated negatively but not significantly with mental health.

Moreover, Oh, Koeske, and Sales (2002) distinguished between two types of assimilation: one related to language assimilation and interaction with the host society, and one related to identity assimilation. The first one was found to be related to lower depression levels, while the second was found to be related to higher depression levels. In the case of the participants in our current study, language assimilation and contact with the host society is slow because of the residence of the biggest percentage of refugees in the refugee establishments and not among other Germans. Also, identity assimilation is not happening because of the big cultural differences, as well as the religious differences. This might also explain why there was no significant relationship between assimilation and mental health.

Finally, Part C of the fourth hypothesis stated that separation correlates negatively to both sociocultural adjustment and well-being. The results of the study confirmed this part of the hypothesis only partially, where separation was negatively but insignificantly correlated with sociocultural adjustment and negatively and significantly correlated with mental health. The

negative correlation between separation and mental health is in line with different studies in the field of acculturation studies, where separation requires the least amount of sociocultural change and therefore it exerts the least amount of stress, but it leaves the individual isolated and experiencing poorer well-being (Stephens (2016), Abu-Rayya (2007), Kim (2006) and Berry et al. (2006)).

On the other hand, various studies showed the negative correlation between separation and sociocultural adjustment (Eshel & Rosenthal (2000), Kosic (2002), and Berry et al. (2006)), but this was not confirmed by this study. However, the regression analysis that was run on sociocultural adjustment as the dependent variable showed that separation contributed negatively to sociocultural adjustment by 15%, but other factors might be at work that are not clearly presented through the results of this study.

Additional Findings

The additional results showed the relationship between age, difficulty of learning the German language and sociocultural adjustment, where age was negatively and significantly correlated with the German language level reached and was also negatively and significantly correlated with sociocultural adjustment. This is in line with a study by Reid et al. (2017) that points out the difficulties in language learning and adjustment to a new culture that older people experience. Additional results also showed that women enjoyed worse sociocultural adjustment than men and generally reached lower German language levels than males, and this is in line with the studies by Watkins et al. (2012).

Moreover, results also showed that the education level reached in Syria correlated with lower depression symptoms as well as higher German language level acquisition, which is in line

with previous research (Esser (2006), Polek et al. (2008), Yu & Wang (2011), Feyera et al. (2015), and Rajjman et al. (2015)).

Finally, a significant difference in mental health rates was found as a function of place of residence in Germany, where those living in private housing experienced better mental health than those living in refugee establishments, and this is in line with a study by Feyera et al. (2015), that showed difference in mental health outcomes between those who lived in camps in Ethiopia and those who lived in private housing in Toronto.

Clinical Implications

The results of this study guide us towards having a holistic view of the mental health of the refugees in Stuttgart, and not just focus on the elderly and the women when it comes to screening for depression and mental health issues. Screening for psychological disorders should be carried out for all refugees across genders and ages, especially those residing in the refugee establishments, where worse mental health rates were found.

Since acquiring the German language was found to be the highest predictor of sociocultural adjustment, clinicians together with humanitarian organizations can organize more studios language circles run by older retired Germans, for instance, who volunteer to give several hours weekly. Based on the results concerning the difficulty of females and older people in learning German and them scoring lower in sociocultural adjustment, these language circles should be held within refugee establishments, because the elderly and women with small children are often bound by their homes. We add that more focus should be given to those of lower educational levels because they have much lower chances of learning the language and experiencing adjustment. Moreover, those with higher education levels and better adjustment can

be invited to volunteer in helping those from their ethnicities who are still falling behind and not experiencing any progress.

Moreover, since adjusting to the German culture was found to be a main predictor of mental health, community cultural seminars can be held, where local German individuals can be invited to answer the questions that the refugees have and likewise, Syrians can answer the questions that the Germans have about them.

Since integration was found to be the optimal choice of acculturation strategy, this should be clarified and advised to the refugees from the very beginning of their stay, so as to spare them poor mental health resulting from acculturative stress and direct them towards better adjustment and well-being.

Organizations can also discuss work options for refugees that fill their time and use their skills. Finally, the refugees experience great stress within the refugee establishments, as they share daily life, including sharing kitchens and toilets with other refugees from other countries. This often causes conflicts within the refugee establishments, and therefore, it is important to hold simple inter-cultural trainings that help the refugees adjust to their living conditions.

Future Research Recommendations

First, we recommend further testing of the available acculturation scales and subscales in an attempt to refine these tools so they become more valid when used in different contexts.

It would be interesting to study how language relates to one's identity, in an attempt to dig deeper into the psychosocial experiences that a refugee goes through in a foreign land, where

one's own mother tongue is not helpful anymore in daily tasks and is required to learn an entire language all over again.

Further studies can be done on differences between immigrants and refugees, to clarify commonalities and differences in the experiences of both groups and in the various factors that impact the sociocultural adjustment and the well-being of each.

Cultural distance and religion seem to have some impact on the willingness and the ability to integrate into a new culture. Deeper studies in this field can help refugees who come from completely different backgrounds to integrate in a way that doesn't wipe out their own culture and religious identities, and it would clarify what integration really means for these groups.

Studies on the relationships between length of stay, sociocultural adjustment and well-being show varying results, and therefore, it would be suggested that more studies are conducted to learn more about the progress of adjustment and well-being as a function of time.

Limitations of the Study

The first limitation to be mentioned is the weak reliability of the separation subscale that was used in this study. Furthermore, it should be noted that this study was limited to refugees in Stuttgart and therefore, results cannot be generalized to Syrian refugees outside Stuttgart, who could have very different experiences in the different contexts. Furthermore, the biggest number of Syrians who participated in the study resided in refugee establishments, and therefore the results are biased towards those living in the refugee establishments.

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Appendix A

Participant Information Letters and Consent Forms in English and Arabic

Participant information letter

Dear Ms./Mr.

I am Samar El Khoury, a student at Haigazian University at the Department of Social and Behavioral Sciences. I am currently carrying out a research study titled: Factors that Impact the Sociocultural Adjustment and Well-being of Syrian Refugees in Stuttgart – Germany, advised by Dr. Hanine Hout.

You are being asked to take part in this study since you are a Syrian living in Stuttgart and you might be facing adjustment problems because of your displacement. Therefore, your contribution would be beneficial for the results of this study, and for the eventual benefit of your fellow Syrian countrymen and women who have been also displaced due to the war.

Kindly read the below information to decide whether you would like to participate in this research study.

Purpose of the Research Project

This research study aims at investigating the factors that impact the social and cultural adjustment and the well-being of Syrian Refugees in Stuttgart. This study will contribute towards the fulfillment of my MA Thesis requirements at Haigazian University.

What will I be asked to do?

- If you choose to participate in this research study, you will be asked to fill in a demographic form and complete three tests. Your participation will extend for approximately 30 minutes. Participation in this project is voluntary. You are free to withdraw anytime without having to give any reason for your withdrawal.

What are my rights?

- Participation in this study is completely voluntary, anonymous and confidential. Your name or any other identifying information will not be asked.
- Data you provide along with data from all participants in the present research will be stored in aggregate in the personal residence of Samar El Khoury and the soft copy of the results will be stored on her personal computer. The data will be analysed and reported in aggregate. Only the principle investigators of this study will have access to the compiled data.
- You have the right to withdraw your consent or discontinue participation at any time for any reason. Your decision to refuse participation or withdraw will not involve any penalty or loss of

benefits to which you are entitled. Discontinuing participation in no way affects your relationship with Haigazian University.

- This research study has been reviewed and has received clearance from the Ethics Committee of the Faculty of Social and Behavioral Sciences at Haigazian University. If you have any further concerns about your rights as a research participant, please, do not hesitate to contact: Dr. Hanine Hout: HANINE.HOUT@haigazian.edu.lb

What are the risks and benefits of participation?

- Participation in this study does not involve any physical risk or emotional risk to you beyond the risks of daily life.
- You will receive no direct benefits from participating in this research; however, your participation does help researchers better understand the factors that help Syrians to adapt to life in Stuttgart.

Contact information

If you have any questions or concerns about the research, you may contact:

Samar El Khoury

Samarkhoury3@gmail.com

00491625857261

Advisor:

Dr. Hanine Hout

HANINE.HOUT@haigazian.edu.lb

009613989812

رسالة توضيحية خاصة بالمشاركين

عزيزتي/عزيزي السيدة / السيد.

أنا سمر الخوري، طالبة في جامعة هيغازيان في قسم العلوم الاجتماعية والسلوكية. أنا أجري حاليا دراسة بحثية بعنوان: العوامل التي تؤثر على التكيف الاجتماعي والثقافي وعلى الصحة النفسية للاجئين السوريين في شتوتغارت - ألمانيا، وذلك بالتعاون مع الدكتورة حنين حوت للإستشارة الأكاديمية.

يطلب منك المشاركة في هذه الدراسة لأنك مواطن سوري تعيش في شتوتغارت نتيجة الأزمة القائمة في سوريا، وقد تواجه مشاكل في التكيف بسبب نزوحك. ولذلك، فإن مساهمتكم ستكون مفيدة لإتمام هذه الدراسة، وللمصلحة العامة الخاصة بأخوتك السوريين من رجال ونساء الذين نزحوا أيضا بسبب الحرب.

يرجى قراءة المعلومات التالية لإقرار ما إذا كنت ترغب في المشاركة في هذه الدراسة البحثية.

الغرض من مشروع البحث:

يهدف هذا البحث إلى دراسة العوامل التي تؤثر على التكيف الاجتماعي والثقافي وعلى الصحة النفسية الخاصة باللاجئين السوريين في شتوتغارت. ستساهم هذه الدراسة في تحقيق متطلبات الماجستير الخاصة بالطالبة سمر الخوري في جامعة هيغازيان - بيروت.

ماذا سيطلب مني أن أفعل؟

• إذا اخترت المشاركة في هذه الدراسة البحثية، سيطلب منك ملء استمارة ديموغرافية وإكمال ثلاثة اختبارات. ستمتد مشاركتك لمدة 30 دقيقة تقريبا.

المشاركة في هذا المشروع طوعية. أنت حر في الانسحاب في أي وقت دون الحاجة إلى إعطاء أي سبب لانسحابك.

ما هي حقوقي؟

- المشاركة في هذه الدراسة هي طوعية تماما، وهويتك تبقى مجهولة وسرية. لن يتم طرح اسمك أو أي معلومات تعريفية أخرى عنك.
- سيتم تخزين البيانات التي تقدمها جنبا إلى جنب مع البيانات من جميع المشاركين في هذا البحث في المنزل الخاص بالطالبة سمر الخوري وسيتم تخزين نسخة إلكترونية من النتائج على جهاز الكمبيوتر الخاص بها. وسيتم تحليل النتائج والإبلاغ عنها بشكل إجمالي وليس بشكل فردي. المحققين الرئيسيين لهذه الدراسة فقط سوف يكون لهم حق الوصول إلى البيانات التي تم تجميعها.
- لك الحق في سحب موافقتك أو التوقف عن المشاركة في أي وقت ولأي سبب كان. قرارك برفض المشاركة أو الانسحاب لن يسبب لك أي عقوبة أو خسارة. التوقف عن المشاركة لا يؤثر أبدا على علاقتك مع جامعة هيغازيان - بيروت.
- تمت مراجعة هذه الدراسة البحثية وحصلت على موافقة لجنة الأخلاقيات في كلية العلوم الاجتماعية والسلوكية في جامعة هيغازيان. إذا كان لديك أي مخاوف أخرى بشأن حقوقك كمشارك في البحث، من فضلك، لا تتردد في الاتصال ب: د. حنين حوت:

HANINE.HOUT@haigazian.edu.lb

ما هي مخاطر وفوائد المشاركة؟

- المشاركة في هذه الدراسة لن تجلب لك أي مخاطر جسدية أو عاطفية تختلف عن مخاطر الحياة اليومية.
- لن تحصل على فوائد مباشرة جراء المشاركة في هذا البحث. إلا أن مشاركتكم تساعد الباحثين على فهم العوامل التي تساعد السوريين على التكيف مع الحياة في شتوتغارت وهذا يجلب المنفعة العامة على المدى البعيد.

معلومات الاتصال

إذا كان لديك أية أسئلة أو استفسارات حول البحث، يمكنك الاتصال ب:

سمر الخوري

Samarkhoury3@gmail.com

00491625857261

المستشارة الأكاديمية:

د. حنين حوت

HANINE.HOUT@haigazian.edu.lb

009613989812

Participant Consent Form

Factors that Impact the Sociocultural Adjustment and Well-being of Syrian Refugees in Stuttgart –
Germany

Please read the following statements and place a check mark in the boxes adjacent to them.

- I agree to participate in this research project conducted for purposes of study. My decision is voluntary and does not involve payment of any kind.
- I know that I can choose to withdraw from participation any time without any penalties or consequences whatsoever. I also hold the right to decline to respond to any question(s) that I may feel uncomfortable with.
- My participation involves answering a questionnaire and taking three tests that would take approximately 30 minutes to finish.
- I have been assured that the researcher will maintain my identity confidential.
- I have been assured that the information from this survey will be used for the purpose of academic study and fulfilling the requirements of an MA Thesis.
- I have received the assurance that this research study has been duly reviewed and approved by the ethics committee of the Faculty of Social and Behavioral Sciences at Haigazian University.
- I have read, listened and fully understand the explanation given to me. All my questions have been satisfactorily answered.
- I, therefore, choose to voluntarily participate in this research study.
- I have received a copy of this consent form co-signed by the researcher.

Participant consent

Date: _____

Name: _____

Signature: _____

Investigator

Date: _____

Name: _____

Signature: _____

موافقة المشارك

العوامل التي تؤثر على التكيف الاجتماعي والثقافي وعلى الصحة النفسية للاجئين السوريين في شتوتغارت – ألمانيا

يرجى قراءة العبارات التالية ووضع علامة "صح" في المربعات المجاورة لها.

أوافق على المشاركة في هذا المشروع البحثي الذي يجرى لأغراض أكاديمية. إن قرارى طوعي ولا ينطوي على مكافأة من أي نوع.

وأنا أعلم أنه يمكنني الانسحاب من المشاركة في أي وقت دون أي عقوبات أو عواقب أيا كان نوعها. ولدي أيضا الحق في رفض الرد على أي سؤال (أسئلة) قد يشعرني بعدم الارتياح.

وتشمل مشاركتي الإجابة على إستبيان وثلاثة اختبارات تستغرق تعبأتها حوالي 30 دقيقة.

لقد تم التأكد من أن الباحث سيحافظ على سرية هويتي.

لقد تم التأكد من أن المعلومات التي تنتج عن هذا البحث سوف تستخدم لأغراض الدراسة الأكاديمية وتكمل متطلبات الماجستير الخاصة بالباحثة.

وقد تلقيت التأكيد بأن هذه الدراسة البحثية قد تم مراجعتها والموافقة عليها من قبل لجنة الأخلاقيات في كلية العلوم الاجتماعية والسلوكية في جامعة هيغازيان.

لقد قرأت واستمعت وفهمت تماما التفسير الذي قدم لي. وقد تم الإجابة على جميع أسئلتي بشكل كافي.

ولذلك، أختار المشاركة الطوعية في هذه الدراسة البحثية.

الباحث

موافقة المشارك

التاريخ: _____

التاريخ: _____

الاسم: _____

الاسم: _____

التوقيع: _____

التوقيع: _____

Appendix B

Demographics Questionnaire in English and Arabic

Kindly, circle the correct answer or fill-in your answer in the space provided.

Gender: Male Female

Age:

Nationality:

National identity (Arabic or Kurdish):

Religion:

Length of stay in Germany:

Family Status: Single Married Divorced Widower

Number of Kids:

Education level achieved in Syria:

German Language level achieved so far:

I speak other foreign languages:

Place of residence: Heim Private Apartment

Work status: - Employed - Searching for a job

- Need to learn language first - Health or kids don't permit me to work

Did you receive support to find a job? Yes No

Is your previous work experience (partly) acknowledged in Germany? Yes No

Work experience in Syria:

Job in Germany:

I am learning a new craft in Germany:

ضع دائرة حول الإجابة الصحيحة أو أكتب الجواب في الفراغ:

الجنس: مذكر مؤنث

العمر:

الجنسية:

القومية:

الدين:

تاريخ الوصول الى ألمانيا (شهر/سنة):

الحالة العائلية: أعزب متزوج مطلق أرمل

عدد الأولاد:

مكان السكن: هايم سكن مستقل

مستوى التعليمي الذي حققته في سوريا:

مستوى اللغة الالمانية الذي بلغته حتى الآن:

أتكلم لغة/لغات أخرى أجنبية:

العمل في ألمانيا: - موظف
- أبحث عن عمل
- الحالة الصحية أو الأولاد يمنعونني عن العمل
- أحتاج الى تعلم اللغة أولاً

هل تلقيت مساعدة لإيجاد وظيفة؟ نعم لا

إذا كنت تملك خبرة مهنية معينة اكتسبتها في سوريا، هل يتم الاعتراف بها جزئياً في المجتمع المهني الألماني؟ نعم لا

خبرتك المهنية في سوريا؟

ما هي وظيفتك في ألمانيا؟

هل تتعلم حرفة معينة في ألمانيا؟ ما هي؟

Appendix C

Experience in Germany Questionnaire in English and Arabic

Do you feel discrimination from locals? Yes No Sometimes

Do you feel stable in Germany? Yes No

Do you feel belonging to Germany? Yes No Need Time

If you get the chance, would you go back to Syria permanently? Yes No

Would you advise your relatives to come and live in Germany? Yes No

Do you feel homesick? Yes No Sometimes Do you feel lonely? Yes No Sometimes

Are all your physical and health needs met in Germany? Yes No Some of them

Did you receive help from Germans in managing your daily life? Yes No

How do you describe your health situation? Very good – Good – Fluctuating – Bad – Extremely Bad

Since your arrival in Germany, did you receive any form of psychological therapy? Yes No

Do you have difficulty adapting to the weather in Germany? Yes No

Do you have difficulty interacting with Germans? Yes No

Do you have difficulty adapting to German food? Yes No

Do you eat German food? Yes No Sometimes

Do you find it difficult to adapt to the German culture? Yes No

Do you watch German TV? Yes No

Did you build any strong relationships since you arrived in Germany? Yes No

If yes, are these friendships with Germans? Yes No Number of German friends:

How much do you perceive the German culture to be far from the Syrian culture?

Very Different Similar in some things and different in others Very similar

Do you encourage your children to learn the German values and traditions? Yes No Some of it

Are you afraid of your children losing the Arabic language? Yes No

How do you spend your free time in Germany?

What are the things you loved about Germany?

What are the things that you found strange/difficult about Germany?

هل تشعر بالتمييز من السكان المحليين؟	نعم	لا	أحيانا
هل تشعر بالإستقرار في ألمانيا؟	نعم	لا	
هل تشعر بالإنتماء الى ألمانيا؟	نعم	لا	أحتاج للوقت
إذا تسنت لك الفرصة هل تعود نهائيا الى سوريا؟	نعم	لا	
هل تنصح أقرباءك بالمجيء الى هذا البلد؟	نعم	لا	
هل تشعر بالحنين الى سوريا؟	نعم	لا	أحيانا
هل تشعر بالوحدة؟	نعم	لا	أحيانا
هل حاجاتك المادية والصحية كلها مؤمنة؟	نعم	لا	البعض منها
هل تلقيت مساعدة من أفراد ألمان لتدبير أمورك؟	نعم	لا	
كيف تصف وضعك الصحي؟	جيد جدا	جيد	متقلب
بعد وصولك الى ألمانيا، هل تلقيت أي دعم نفسي من مختصين؟	نعم	لا	سيء جدا
هل لديك صعوبة في التأقلم مع مناخ ألمانيا؟	نعم	لا	
هل لديك صعوبة في التواصل مع الألمان؟	نعم	لا	
هل لديك صعوبة في التأقلم مع الطعام الألماني؟	نعم	لا	
هل تأكل الأكل الألماني؟	نعم	لا	أحيانا
هل لديك صعوبة في التأقلم مع الثقافة الألمانية؟	نعم	لا	
هل تشاهد التلفاز باللغة الألمانية؟	نعم	لا	
هل بنيت صداقات عميقة في ألمانيا منذ وصولك؟	نعم	لا	
إذا كان الجواب نعم، هل هذه الصداقات هي مع أفراد ألمان؟	نعم	لا	العدد:
برأيك، الى اي درجة تختلف الثقافة الألمانية عن الثقافة السورية؟			
تقارب شديد -- تقارب في بعض الأمور واختلاف في أمور أخرى -- اختلاف شديد			
هل تشجع أن يتعلم أولادك القيم والعادات الألمانية؟	نعم	لا	البعض منها
هل تخاف أن يتعلم أولادك العادات الثقافية الألمانية؟ فسّر.			
هل تخاف أن يخسر أولادك اللغة العربية؟	نعم	لا	
كيف تمضي وقت فراغك؟			
ما هي الأمور التي أحببتها في ألمانيا؟			
ما هي الأمور الأكثر صعوبة/ غرابة في لألمانيا؟			

Appendix D

Acculturation Attitudes Scale (16 items) in English and Arabic

	Totally Disagree	Disagree	Neutral	Agree	Totally Agree
1- I feel that it is not important for [ethnic group] either to maintain their own cultural traditions or to adapt to those of [national]	1	2	3	4	5
2- It is more important to me to be fluent in [national language] than in [ethnic language]	1	2	3	4	5
3- I would rather marry a [ethnic] than a [national]	1	2	3	4	5
4- I feel that [ethnic group] should maintain their own cultural traditions but also adapt to those of [national]	1	2	3	4	5
5- I would rather marry a [national] than a [ethnic]	1	2	3	4	5
6- I feel that [ethnic group] should adapt to [national] cultural traditions and not maintain those of their own	1	2	3	4	5
7- It is not important to me to be fluent either in [ethnic language] or [national language]	1	2	3	4	5
8- I prefer social activities that involve [ethnic group members]	1	2	3	4	5
9- I prefer to have only [ethnic] friends	1	2	3	4	5
10- I don't want to attend either [national] or [ethnic] social activities	1	2	3	4	5
11- I like both [national] music-groups and [ethnic] music groups	1	2	3	4	5
12- I don't want to have either [national] or [ethnic] friends	1	2	3	4	5
13- I prefer music-groups of my [own ethnic group] rather than [national] music groups	1	2	3	4	5
14- I prefer to have both [ethnic] and [national] friends	1	2	3	4	5
15- I prefer to have only [national] friends	1	2	3	4	5
16- I prefer social activities that involve both [national members] and [ethnic members]	1	2	3	4	5

أوافق بشدة	موافق	معتدل	غير موافق	أعارض بشدة	ما رأيك بالعبارات التالية؟
5	4	3	2	1	1- يجب على السوريين أن ينسوا العادات الثقافية الخاصة بهم وأن يحذروا من تعلم العادات الألمانية أيضاً.
5	4	3	2	1	2- ليس من الضروري بالنسبة لي أن أتكلم العربية. من الأهم بالنسبة لي أن أركز على تكلم اللغة الألمانية بطلاقة
5	4	3	2	1	3- أفضل أن أتزوج من شخص سوري على أن أتزوج من شخص ألماني.
5	4	3	2	1	4- أشعر أن السوريين يجب أن يحافظوا على العادات الثقافية السورية الخاصة بهم ولكن أن يتأقلموا مع العادات الثقافية الألمانية.
5	4	3	2	1	5- أفضل أن أتزوج شخصاً ألمانياً على أن أتزوج شخصاً سورياً.
5	4	3	2	1	6- أشعر أن السوريين يجب أن يتأقلموا مع العادات الألمانية لمساعدتهم على الاندماج في ألمانيا. تمسكهم بالعادات السورية يؤخر اندماجهم لذا يجب أن يتركوا العادات السورية.
5	4	3	2	1	7- ليس أمراً مهماً بالنسبة لي أن أتقن اللغة العربية ولا اللغة الألمانية. يصعب علي التعبير عن مشاعري في كلتا اللغتين.
5	4	3	2	1	8- أفضل النشاطات الإجتماعية التي تضم أفراد سوريين.
5	4	3	2	1	9- أفضل أن يكون لدي فقط أصدقاء سوريين.
5	4	3	2	1	10- لا أود أن أحضر النشاطات الإجتماعية الألمانية ولا منها السورية.
5	4	3	2	1	11- أحب أن أستمع الى فرق الموسيقى الألمانية والسورية على حد سواء.
5	4	3	2	1	12- لا أريد أن يكون لدي أصدقاء ألمان ولا أصدقاء سوريين. يصعب علي التفاهم مع أي أحد.
5	4	3	2	1	13- أفضل الفرق الموسيقية السورية على الفرق الموسيقية الألمانية.
5	4	3	2	1	14- أفضل أن يكون لدي أصدقاء ألمان وسوريين.
5	4	3	2	1	15- أفضل أن يكون لدي فقط أصدقاء ألمان.
5	4	3	2	1	16- أفضل النشاطات الإجتماعية التي تضم أفراد ألمان وسوريين على حد سواء.

Appendix E

The Revised Sociocultural Adjustment Scale (21 items) in English and Arabic

	Not at all competent	Not competent	Neutral competency	Competent	Extremely competent
1. Building and maintaining relationships.	1	2	3	4	5
2. Managing my academic/work responsibilities.	1	2	3	4	5
3. Interacting at social events.	1	2	3	4	5
4. Maintaining my hobbies and interests.	1	2	3	4	5
5. Adapting to the noise level in my neighbourhood.	1	2	3	4	5
6. Accurately interpreting and responding to other people's gestures and facial expressions.	1	2	3	4	5
7. Working effectively with other students/work colleagues.	1	2	3	4	5
8. Obtaining community services I require.	1	2	3	4	5
9. Adapting to the population density.	1	2	3	4	5
10. Understanding and speaking [host language].	1	2	3	4	5
11. Varying the rate of my speaking in a culturally appropriate manner.	1	2	3	4	5
12. Gaining feedback from other students/work colleagues to help improve my performance.	1	2	3	4	5
13. Accurately interpreting and responding to other people's emotions.	1	2	3	4	5
14. Attending or participating in community activities.	1	2	3	4	5
15. Finding my way around.	1	2	3	4	5
16. Interacting with members of the opposite sex.	1	2	3	4	5
17. Expressing my ideas to other students/work colleagues in a culturally appropriate manner.	1	2	3	4	5
18. Dealing with the bureaucracy.	1	2	3	4	5
19. Adapting to the pace of life.	1	2	3	4	5
20. Reading and writing [host language].	1	2	3	4	5
21. Changing my behaviour to suit social norms, rules, attitudes, beliefs, and customs.	1	2	3	4	5

كيف أجد نفسي في النشاطات التالية في ألمانيا؟

النشاط...	غير كفوء أبداً	قليل الكفاءة	معتدل الكفاءة	كفوء	عالي الكفاءة
1- بناء العلاقات والمحافظة عليها	1	2	3	4	5
2- ادارة مسؤوليات العمل أو الدراسة الخاصة بي	1	2	3	4	5
3- التفاعل في النشاطات الإجتماعية	1	2	3	4	5
4- المحافظة على هوياتي واهتماماتي	1	2	3	4	5
5- التأقلم مع مستوى الضوضاء/السكون في الحي مقارنة مع ما كنت معتاداً له في بلدي	1	2	3	4	5
6- فهم ايماءات الناس وتعبير وجههم والاستجابة معها بدقة	1	2	3	4	5
7- العمل بشكل فعال مع زملاء الدراسة أو العمل	1	2	3	4	5
8- الحصول على الخدمات الإجتماعية التي أحتاج إليها	1	2	3	4	5
9- التكيف مع الكثافة السكانية	1	2	3	4	5
10- فهم وتكلم اللغة الألمانية	1	2	3	4	5
11- تغيير سرعة كلامي لتناسب مع الثقافة	1	2	3	4	5
12- القدرة على تلقي التعليقات من زملاء الدراسة أو العمل لمساعدتي على تحسين أدائي	1	2	3	4	5
13- فهم مشاعر الآخرين والاستجابة معها بدقة	1	2	3	4	5
14- الحضور أو المشاركة في النشاطات الإجتماعية	1	2	3	4	5
15- أعرف كيف أجد الأماكن التي أحتاج أن أصل إليها	1	2	3	4	5
16- التفاعل مع أفراد الجنس الآخر	1	2	3	4	5
17- التعبير عن آرائي لزملاء الدراسة أو العمل بأسلوب مناسب ثقافياً	1	2	3	4	5
18- القدرة على تخليص المعاملات/البير وقراطية	1	2	3	4	5
19- التكيف مع نمط الحياة	1	2	3	4	5
20- قراءة وكتابة اللغة الألمانية	1	2	3	4	5
21- تغيير سلوكي ليتناسب مع الأعراف الإجتماعية، القواعد، الإتجاهات، المعتقدات والعادات	1	2	3	4	5

Appendix F

The Mental Health Inventory (18 items) in English and Arabic

During the past 4 weeks, how much of the time...

	All of the time	Most of the time	A good bit of the time	Some of the time	A little bit of the time	None of the time
1. has your daily life been full of things that were interesting to you?	1	2	3	4	5	6
2. did you feel depressed?	1	2	3	4	5	6
3. have you felt loved and wanted?	1	2	3	4	5	6
4. have you been a very nervous person?	1	2	3	4	5	6
5. have you been in firm control of your behaviour, thoughts, emotions, feelings?	1	2	3	4	5	6
6. have you felt tense or high-strung?	1	2	3	4	5	6
7. have you felt calm and peaceful?	1	2	3	4	5	6
8. have you felt emotionally stable?	1	2	3	4	5	6
9. have you felt downhearted and blue?	1	2	3	4	5	6
10. were you able to relax without difficulty?	1	2	3	4	5	6
11. have you felt restless, fidgety, or impatient?	1	2	3	4	5	6
12. have you been moody, or brooded about things?	1	2	3	4	5	6
13. have you felt cheerful, light-hearted?	1	2	3	4	5	6
14. have you been in low or very low spirits?	1	2	3	4	5	6
15. were you a happy person?	1	2	3	4	5	6
16. did you feel you had nothing to look forward to?	1	2	3	4	5	6
17. have you felt so down in the dumps that nothing could cheer you up?	1	2	3	4	5	6
18. have you been anxious or worried?	1	2	3	4	5	6

خلال الأربيع أسابيع الماضية،

السؤال...	كل الوقت	معظم الوقت	فسحة كبيرة من الوقت	بعض الوقت	قليلا من الوقت	أبدا
1- كم من الوقت كانت حياتك اليومية مليئة بالأشياء التي تثير اهتمامك؟	1	2	3	4	5	6
2- كم من الوقت كنت تشعر بالإكتئاب؟	1	2	3	4	5	6
3- كم من الوقت شعرت أنك محبوب ومرغوب؟	1	2	3	4	5	6
4- كم من الوقت كنت شخصا عصبيا؟	1	2	3	4	5	6
5- كم من الوقت كان لديك سيطرة قوية على تصرفاتك، وأفكارك، وعواطفك، ومشاعرك؟	1	2	3	4	5	6
6- كم من الوقت شعرت بالتشنج أو بالتوتر؟	1	2	3	4	5	6
7- كم من الوقت شعرت بالهدوء والسلام؟	1	2	3	4	5	6
8- كم من الوقت شعرت بالإستقرار العاطفي؟	1	2	3	4	5	6
9- كم من الوقت شعرت بالإحباط والحزن؟	1	2	3	4	5	6
10- كم من الوقت استطعت أن تسترخي من دون صعوبة؟	1	2	3	4	5	6
11- كم من الوقت شعرت بالقلق، والإضطراب، وضيق الصدر؟	1	2	3	4	5	6
12- كم من الوقت كان مزاجك متقلب وأطلت التفكير بالأمر؟	1	2	3	4	5	6
13- كم من الوقت شعرت بالمرح والإبتهاج؟	1	2	3	4	5	6
14- كم من الوقت كانت معنوياتك منخفضة أو شعرت بالحزن الشديد؟	1	2	3	4	5	6
15- كم من الوقت كنت شخصا فرحا؟	1	2	3	4	5	6
16- كم من الوقت شعرت أنه ليس لديك أي شيء تتطلع إليه؟	1	2	3	4	5	6
17- كم من الوقت شعرت أنك في أسفل الوادي وأنه لا يوجد أي شيء يستطيع أن يفرحك؟	1	2	3	4	5	6
18- كم من الوقت كنت قلقا أو مهموما؟	1	2	3	4	5	6

Appendix G

The description of the various German language levels

Proficient User	C2	Can understand with ease virtually everything heard or read. Can summarise information from different spoken and written sources, reconstructing arguments and accounts in a coherent presentation. Can express him/herself spontaneously, very fluently and precisely, differentiating finer shades of meaning even in more complex situations.
	C1	Can understand a wide range of demanding, longer texts, and recognise implicit meaning. Can express him/herself fluently and spontaneously without much obvious searching for expressions. Can use language flexibly and effectively for social, academic and professional purposes. Can produce clear, well-structured, detailed text on complex subjects, showing controlled use of organisational patterns, connectors and cohesive devices.
Independent User	B2	Can understand the main ideas of complex text on both concrete and abstract topics, including technical discussions in his/her field of specialisation. Can interact with a degree of fluency and spontaneity that makes regular interaction with native speakers quite possible without strain for either party. Can produce clear, detailed text on a wide range of subjects and explain a viewpoint on a topical issue giving the advantages and disadvantages of various options.
	B1	Can understand the main points of clear standard input on familiar matters regularly encountered in work, school, leisure, etc. Can deal with most situations likely to arise whilst travelling in an area where the language is spoken. Can produce simple connected text on topics, which are familiar, or of personal interest. Can describe experiences and events, dreams, hopes & ambitions and briefly give reasons and explanations for opinions and plans.
Basic User	A2	Can understand sentences and frequently used expressions related to areas of most immediate relevance (e.g. very basic personal and family information, shopping, local geography, employment). Can communicate in simple and routine tasks requiring a simple and direct exchange of information on familiar and routine matters. Can describe in simple terms aspects of his/her background, immediate environment and matters in areas of immediate need.
	A1	Can understand and use familiar everyday expressions and very basic phrases aimed at the satisfaction of needs of a concrete type. Can introduce him/herself and others and can ask and answer questions about personal details such as where he/she lives, people he/she knows and things he/she has. Can interact in a simple way provided the other person talks slowly and clearly and is prepared to help.