Association of Pre-Migration Socioeconomic Status and Post-Migration Mental Health in Syrian Refugees in Lebanon: a Descriptive Sex-Stratified Cross-Sectional Analysis

Background: Refugee populations present with high levels of psychological distress. The extent, however, may vary among sociodemographic characteristics. This study seeks to investigate the association between pre-migration socioeconomic status (SES) and post-migration mental health in male and female Syrian refugees in Lebanon.

Methods: In a cross-sectional study, a clustered random sample of 599 refugees from Syria were recruited within 12 months after they fled to Lebanon. Logistic regression was used to determine the association between self-reported pre-migration SES and clinically relevant levels of anxiety or depressive symptoms assessed on the HSCL-25 scale, both for the entire sample and stratified by sex. Sensitivity analyses were run using different thresholds of the HSCL-25 scores, and with missing observations on HSCL-25 set to extreme values. To assess the informative value of self-reported SES, its correlation with education variables was tested.

Results: Using complete cases, 457 participants (322 female, 135 male) were included in the main analysis. Females showed on average more symptoms of anxiety (Median: 2.5) and depression (Median: 2.4) than males (Median: 2.10 and 2.07, respectively). Below average SES was associated with significantly higher odds for mental illness compared to average SES (anxiety: OR = 4.28, 95% CI [2.16, 9.49]; depression: OR = 1.85, 95% CI [1.06, 3.36]; both p < 0.001). For anxiety, differences between SES strata were more pronounced among males than females. Sensitivity analyses mostly confirmed the results. SES showed a weak positive correlation with education.

Conclusion: In Syrian refugees in Lebanon, below average SES is associated with worse mental health outcomes compared to average SES. Females showed more symptoms of anxiety and depression than males. These differences demand for further research into the underlying mechanisms to tailor interventions to this vulnerable population.

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