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Integration Policies, Practices and Experiences

Sweden Country Report

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List of abbreviations

AA	The Administrative Act (2017:900) (Förvaltningslag 2017:900)
ABO	Accommodation provided by the Swedish Migration Agency
AT-UND	Certificate for exemption from a work permit
CAB	County Administrative Board
CSN	Centrala studiestödsnämnden (The Swedish Board of Student Finance)
CSOs	Civil Society Organisations
EBO	Accommodation arranged by Asylum Seekers
EEA/EES	European Economic Area/Europeiska ekonomiska samarbetet
EMN	European Migration Network
EU	European Union
FARR	Flyktinggruppernas Riksråd
FBOs	Faith Based Organisations
KOMVUX	Kommunal Vuxenutbildning (Adult Education Course)
NBHW	The National Board of Health and Welfare (Socialstyrelsen)
NIER	The National Institute for Economic Research
NGOs	Non-Governmental Organisations
OECD	Organisation for Economic Co-operation and Development
PBO	Introduction programme
PES	Public Employment Service
PHAS	The Public Health Agency of Sweden (folkhälsomyndigheten)
SAA	The Swedish Aliens Act (2005:716)
SALAR	Swedish Association of Local Authorities and Regions
SCA	The Swedish Citizenship Act (2001:82)
SCB	Statistics Sweden
SE	Swedish language
SEK	Swedish Crowns
SFI	Svenska för invandrare (Swedish for immigrants)
SMA	Swedish Migration Agency
SNAE	Swedish National Agency for Education
SOU	Statens offentliga utredningar (Official Reports of the Swedish Government)
TA	The Temporary Act on Limitations to The Possibility of Being Granted a Residence Permit in Sweden (2016:752)
UAM	Unaccompanied Minor
UN	United Nations
UNHCR	United Nations High Commission for Refugees

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About the project

RESPOND is a Horizon 2020 project which aims at studying the multilevel governance of migration in Europe and beyond. The consortium is formed of 14 partners from 11 source, transit and destination countries and is coordinated by Uppsala University in Sweden. The main aim of this Europe-wide project is to provide an in-depth understanding of the governance of recent mass migration at macro, meso and micro levels through cross-national comparative research and to critically analyse governance practices with the aim of enhancing the migration governance capacity and policy coherence of the EU, its member states and third countries.

RESPOND will study migration governance through a narrative which is constructed along five thematic fields: (1) Border management and security, (2) Refugee protection regimes, (3) Reception policies, (4) Integration policies, and (5) Conflicting Europeanisation. Each thematic field reflects a juncture in the migration journey of refugees and is designed to provide a holistic view of policies, their impacts and the responses given by affected actors within.

In order to better focus on these themes, we divided our research question into work packages (WPs). The present report is concerned with the findings related to WP5, which focuses specifically on Sweden's integration system and experiences of asylum seekers and refugees.

Executive summary

This report explores the Swedish integration policies and practices as well as their implementation as experienced by newcomers. Integration refers to the permanent settlement period that sets in after the acquisition of a permanent residence permit, or when one starts mentally adapting to the host society. Through a multilevel governance approach, it highlights how legal, political, and institutional integration frameworks in Sweden affect integration outcomes. The latter refers specifically to the way newcomers establish themselves in the new society and negotiate their new social positions.

In recent history, Sweden has been a country of both emigration and immigration. Due to the changing number of immigrants, integration has been subjected to several policy changes. From 2010, we saw a steady increase in asylum seekers until it reached its peak in 2015. Sweden introduced a number of drastic legislative measures in 2016, which in some cases moved Sweden's migration policies from one of the more generous to minimum requirement levels in the EU. With the Establishment reform in 2010 (Lag 2010:197), the focus shifted from integration to establishment and also transferred major responsibilities from the municipalities to the Public Employment Service (PES). The main pillars of integration are therefore, language acquisition and labour market integration. Indeed, since 1994, Swedish for immigrants language education has been available to all new residents and since 2018, there is an obligatory education and job-training programme for newly arrived migrants. With regard to discrimination and segregation the Swedish government has set the explicit goals of "equal rights, responsibilities and opportunities for all, regardless of their ethnic or cultural background".

The report compiles data from different sources (academic literature, research reports, official texts, policies and other relevant texts, interviews conducted both at micro and meso level) in order to provide comprehensive insights into regulations, policies, practices and experiences of integration in Sweden. Thus, the report aims to paint an integrated picture of how different components interact and affect migrant populations. The results are also relevant for future research that will specifically include host populations. The report specifically highlights the effects of a post-migration context on mental health and psychosocial integration, while emphasizing that all areas of daily functioning, namely housing, access to education and the labour market, as well as access to citizenship and a general feeling of belonging, are interconnected and combine in a comprehensive view. The key findings from first interviews and analysis include.

Labour Market Integration: The Swedish government has placed considerable emphasis on labour market integration and has made it the main focus of its integration policy. This is due to the rising unemployment rate especially among foreign-born populations. The Public Employment Service has the main responsibility for the establishment of newcomers. Despite a comprehensive establishment programme, and strong motivation from newcomers, they continue to have a hard time integrating into the labour market. This can be attributed to the lack of communication between multiple levels of government and a failure to coordinate language learning and job-training in accordance with individual skills. Respondents point out that language and lack of information are important barriers, as well as the nature and type of work offered – often

with temporary contracts and short hours. Last but not least, discrimination seems to be a major obstacle, preventing newcomers from obtaining a permanent job.

Education: Education is one of the strongest pillars of the Swedish integration system. Upon receiving a residence permit, all newcomers are able to participate in SFI and as residents have access to schools and universities like everyone else. During the asylum period municipalities are responsible for providing education to all newcomer children under 18, and for the UAMs. While language skills may be a barrier to academic performance, some larger districts, including Stockholm and Malmö, have created “sprint” and “start-up” courses to compensate for potential disparities.

Housing: Segregation is a big issue, reflected in performance and connected to geographical segregation areas with a high concentration of immigrants. Respondents in micro level interviews affirm that not being able to come into social contact with Swedish speakers slows down language learning. Housing is one of the major challenges, not only for newcomers’ integration, but for Sweden as a whole. According to the National Board of Housing, Building and Planning (Boverket) 83 percent of Sweden’s municipalities reported a shortage of housing in 2019. In January 2020, Sweden introduced new legislation that restricts asylum seekers from arranging housing themselves through EBO, in order to encourage settlement in areas with better labour market opportunities. Indeed, Sweden has experienced large geographical disparities in the past. Spatial segregation has contributed to raising a number of issues, especially lack of access to infrastructure and education as well as job opportunities. Participants living in rural areas, affirm the additional pressure that comes with their living situation, describing it as “detention”. The lack of social contact with Swedes, and cluster housing of refugees, hinders engagement with the broader society and ultimately limits successful integration.

Psychosocial Health: Access to the Swedish healthcare services is quite cumbersome for refugees. Those who fall outside the Swedish protection system such as undocumented migrants are faced with a lot of uncertainty especially in emergency cases. After rejections or in the deportation stage asylum seekers often face difficulties in accessing healthcare services and in some instances their legal status leads to denial of healthcare. As our interview data has revealed, for refugees in general, their health condition is noticeably connected with their legal status, employment possibilities, housing, and the future as a whole. In health services, though newcomers express easy access, they also express lack of compassion by caregivers or not being taken seriously. Providing strongest meaning-giving for newcomers we find religion, family, children, and work.

Citizenship and Belonging: Citizenship is explored in the context of participation in the Swedish community as well as a general feeling of belonging. Interaction and social contact varies widely and could be linked to a variety of factors such as geographical location, language skills, existential meaning-making and value systems. Feelings of belonging are related to cultural understandings. The degree of perceived and experienced respect for the individual’s existential meaning-making and value systems seems to influence the feeling of belonging and attachment to the host country’s perceived existential meaning-making and value systems. For some, values connected to gender and sexuality are met with reservations. However, values and beliefs remain highly personal and individual ruling out simplistic generalizations.

Formulating policy recommendations, the report concludes that all areas of daily functioning are interconnected. A flaw in one area such as geographical isolation may heavily affect another, such as access to the labour market and equally affect post-migration mental health. Rather than focusing efforts on language and labour market integration, a more holistic approach as well as an anti-discrimination strategy may be effective. Special attention should also be given to cultural meaning-giving systems (such as religion) in formulating integration policy and adjusting integration practices, as these play an important role for asylum seekers and may play an important role in ensuring successful integration.

1. Introduction

Our approach in the RESPOND project is that migration governance is not only about what makes people move (pre-migration context), but also about what people do after they cross borders and settle into a new country. Integration policies, practices and outcomes are directly linked to the governance of migration. Without examining integration, a full understanding of migration governance will always be lacking. This has been our starting point in this project. To examine how integration policies and processes are related to migration governance we will study integration policies, practices, and responses, with a particular focus on how legal, political, and institutional frameworks affect integration outcomes. Most importantly, through a micro level focus, we will explore how newcomers¹ negotiate their new social positions and how they describe their integration experiences in the labour market, housing, education, health services, and citizenship-belonging, enriched with meso and macro level information. However, rather than treating refugees as unitary actors, we will pay attention to differences in gender, citizenship status, age, country of origin, among other important independent variables. We will approach refugees as individuals who can speak and act for themselves and consequently negotiate their own space in their new countries.

Guiding questions for this report on the macro level have been, what characterises the legal-political dimension of integration policies and processes in migration governance? With regards to macro and meso levels, the guiding questions have been, what is the socioeconomic position of immigrants (former asylum-seekers) in host societies? On meso and micro levels, we have asked, how do newcomers negotiate their position in their new societies, and how do they respond/interact with policies and processes aimed at achieving their integration on legal-political, socio-economic and socio-cultural levels? Furthermore, on a micro level, how does settlement affect the lives of newcomers and policies, institutions and economies? And, what new social, cultural and political realities are constructed? These questions, together with more detailed ones, are elaborated in this country report.

This WP coverage in RESPOND is closely linked to the WP4 on reception. While reception mainly focused on the early period of arrival in Sweden, integration focuses on the permanent settlement period. Thus, one way to differentiate this WP from WP4 in RESPOND, is that the integration phase covers the settlement period from when one has received a residence permit, or if still waiting, they have been long enough in the country that they mentally feel they are adapting to society.

For an analytical framework of migration and integration we have in our project used Peter Scholten and Rinus Penninx (2016) approach, understanding integration as multi-level policy issues that generate complex relations between local, regional, national, and EU institutions. They introduce the framework of multilevel governance “as one possible way of structuring relations between various government levels” in the field of immigration and integration policies (ibid., p.92).

Integration can conceptually be defined in many ways, which adds to the complexity and richness of the topic, necessitating an interdisciplinary approach to

¹ We are using the term newcomer beyond the legal status, covering all asylum seekers, refugees, including rejected asylum claimants.

comprehend its broad consequences on individual and societal levels. For the RESPOND project in general, we use a heuristic model for the empirical study of integration developed by Penninx and Garcés-Mascareñas (2016). They identify three analytically distinct dimensions in the definition of integration: 1) the legal-political, referring to residence and political rights and statuses; 2) the socio-economic, referring to the social and economic position of residents, such as access to institutional facilities for finding work, housing, education, and healthcare; and 3) the cultural-religious, pertaining to the domain of perceptions and practices of immigrants and the receiving society (ibid., p.14ff). The authors point out that these three dimensions are not fully independent of one another. Furthermore, these three dimensions of integration can be measured both within the immigrant population and within the receiving society in terms of individual, collective/group and institutions, each of which is a focus of our study.

When approaching integration as the increasing social membership in the destination country (Bartram, Poros & Monforte 2014), in an analytical sense one can distinguish integration as one strategy among other strategies, including assimilation, separation, and marginalization (Rudmin 2009). Integration in the economic and political sphere would mean that immigrants participate in the labour market and enjoy political rights on equal terms with natives. In the identity and belonging sphere it would mean to feel that one in some meaningful sense could identify with the host country or acquire citizenship. However, aside from the personal ability of immigrants, such as gaining language skills or cultural competency, what is at stake here is also the level of inclusion and exclusion of newcomers in different societies, due to normatively laden expectations of integration often rooted in ethnocentrism and practices of discrimination. Drawing from these insights about integration, we focus on processes before and after arrival, as well as on how migrants gain competence and participation in society. *Religion* is an important factor worth a specific analysis, as it is often pushed to the fore in political debates and media discourses on integration. *Citizenship* is another central factor in the integration debate. Recent research stresses that citizenship is not just a set of legal rights and duties, but also a form of belonging (e.g. Yuval-Davis 2006), particularly for migrant groups (e.g. Castles & Davidson 2000; Reed-Danahay & Brettell 2008). The importance of citizenship for social integration and for a stable sense of belonging can be found directly within the wording of the Swedish Citizenship Act (SCA) (2001:82). Citizenship means as stipulated in its first paragraph (1 §): “a legal relationship between citizens and the state that brings with it rights and obligations for both parties. Citizenship unites all citizens and represents a common belonging in Sweden. Citizenship represents the formal membership in the Swedish community and is a base for public order”. In this report, we look at lived relationships and conceptions of citizenship for refugees.

In this report focused on integration, where the micro level interviews with migrants have been our starting point, we have found it necessary to add to the above analytical framework, although in a very brief manner for this type of report. The integration process involves the migrant person, family, group and their complex journeys as well as the receiving host country's laws and policies governing integration, the broader civil society, as well as the response and involvement of the host country's members. Though the report is divided into different sectors, it is important to understand that the experience of migrant persons brings together the total impact of all of these sectors on their life systems before arriving in the host country and their experiences in the host country. Life systems draw upon the interaction of five areas in every person's daily

functioning, and has been researched specifically with vulnerable populations including forced migrants and survivors of natural or other disaster situations: these areas are – safety and security; interpersonal bonds and networks; justice; identities and roles; and existential meaning (Silove 2013; Boyd-MacMillan & DeMarinis 2020). In cases of war and forced migration, the disruption of these systems needs to be recognized and addressed by both the host society members and structures in active cooperation with the migrant populations, if sustainable integration is the desired goal. In this report, there is a separate section on psychosocial health. However, it is important to understand that all sectors included in the report form an integrated picture of the components and interactions of these life systems both for the migrant populations as well as the society as a whole, as all play a critical role in the social determinants of migrant populations' mental health. Though there is ample evidence that pre-migration trauma does predict certain mental ill-health conditions, the post-migration context can be an equally powerful determinant of mental health and psychosocial integration. Moreover, post-migration factors may moderate the ability of refugees to recover from pre-migration trauma (Hynie 2018). In this respect the report can be viewed as a public mental health promotion effort (DeMarinis & Boyd-MacMillan 2019). Though some of these themes are integrated into the sector areas, this analysis is situated in the final chapter where an overview of the sectors is provided.

Method and Sources

Broadly speaking the RESPOND project as well as this report has largely applied a transdisciplinary research design, by establishing a strong collaboration beyond discipline-specific approaches, exchanging information and sharing sources. The report follows the overall methodology in RESPOND, where the level of analysis is structured along macro (policy), meso (implementation) and micro (individual) levels. Data utilised for this report consists of three primary sources: 1) Legal and policy documents related to integration policy to provide a contextual background to the analysis (mainly the Official Reports of the Swedish Government - Statens offentliga utredningar – SOU), 2) stakeholder interviews to understand implementation processes in the field of integration, <https://www.pass.umu.se> and 3) interviews with the three main migrant groups in Sweden.

Sampling

The main receiving counties (*län*) during the recent years have in general been Västra Götaland, Stockholm and Skåne (Source: Migrationsverket). However, for a geographical spread as well as for highlighting the peripheries we also chose individuals from smaller receiving municipalities. Locations were chosen based on the population groups:

- Centre: Greater Stockholm, Trollhättan, Uppsala, Södertälje, Göteborg, Malmö, Gävle
- Periphery: Trelleborg, Skövde, Skara, Nyköping, Umeå, Västerås

We used gatekeepers as well as a snowball method to recruit new respondents. The micro-level interviews were conducted with 61 newcomers in 2018-2019, using the following criteria: geographical spread (centre and periphery locations), the largest migrant groups, gender, age, religious/cultural adherence, and arrival between 2011 -

2018. The criteria for inclusion were those with refugee status, those granted subsidiary protection, those with a special status due to particular legislation in the country of residence, (including undocumented migrants who arrived during the time span covered), those refugees/asylum seekers who had received a residence permit in the time span covered. A further inclusion criterion was the three largest immigrant populations during recent years, which in 2015-2016 were Syrians, followed by Afghans, and Iraqis (Source: Statistics Sweden 2018). We haven't strategically selected vulnerable groups, as this is both problematic and stigmatizing. Instead, we have opened our initial contact with the individuals involved, whether or not they identified themselves within a specific category.

The micro-level interviews were based on a semi-structured guideline, designed by the RESPOND research team. Relevant interview questions from all RESPOND work packages, including integration, were put together (See Annex VI for the questionnaire related to integration experiences).

An overview of our interview material is found in Tables 6, 7 and 8 in Appendix.2 Our participants (n=61) were distributed along three countries of origin (Syria = 44, women 48%; Afghanistan = 15, women 47%; and Iraq = 2, one of each gender). The large majority were married, of which 45% were women. The majority had a higher secondary or tertiary education, of which 49% were women. Though a limited number, divorce (n=8) was predominant among the women (n=7, 88%). Among those who reported a kind of vulnerability, e.g., a single parent with minor children (n=5), all were women; serious illness (n=6), five (83%) were women; torture (n=4), three (75%) were men; rape and other serious forms of psychological, physical or sexual violence (n=5), three (60%) were women. Of those who had received a first instance rejection (n=14), nine (64%) were men. Of those who had experienced a sea rescue (n=11), six (55%) were women; and violence at the border (any border in or before Sweden) (n=19), eleven (58%) were women. The general experience with reception administrators (17, 28% reporting rather/not supportive) and with NGOs (4, 7% reporting rather/not supportive at all) didn't show major gender differences. Experience of physical or mental assaults were limited, only 9 persons reported positively (women 6, 67%), on the other hand 18 persons responded negatively, and 34 persons didn't provide any response at all. Further results are presented in each section respectively.

Additionally, interviews were conducted with stakeholders working in the field of integration. By stakeholders we have in the project at large considered actors with a meaningful institutional-centred practice (at social/economic or political level) with effect to migration/integration. The aim was to understand the implementation of integration policies, identify the main problems and challenges and explore the experiences of stakeholders in their encounters with migrants. Within the RESPOND-project nine interviews with stakeholders working in the field of integration were conducted. One of the stakeholders works at a County Administrative Board (*Länsstyrelsen*); three of them work at different municipalities where a large number of migrants reside; one is a representative of a municipal council; another is a representative of an NGO; two of them are healthcare practitioners in a primary care centre for asylum seekers; and one is the director of the Transcultural Centre in Stockholm (funded by the regional county council). Additionally, from other projects our

² As this is a convenience sample, we do not present any statistical significance for independent variables.

researchers are involved in, we could make use of interviews with stakeholders.³ In addition, two roundtables were organised in December 2018 and January 2019 with the participation of stakeholders (governmental, non-governmental actors) working in the fields of asylum policies (protection), reception, and integration.

The empirical material is analysed through a procedure of qualitative content analysis. Through a deductive approach, we have used conceptual themes to structure this report and define the content of each category in terms of inclusion and exclusion. Along with this, we have used an inductive approach when choosing the codes that best reflect the conceptual themes, as well as kept an openness for material not covered by our framework.

To increase the level of validity and reliability, we have made use of an open process of coding of material, where themes and categories as well as examples of codes have been provided in advance. The coding of material, using the software NVivo, has been done by one of our research assistants, and checked by the senior researchers. An extended set of codes was provided to give a thick description to themes and categories, while only some of these codes are included in this report. The remaining codes have been summarised along a thematic structure.

As for the project in general, we have received ethics clearance from the Swedish Ethical Review Authority. Being sensitive to the possible difficult experiences of the participants, we saw to it that our interviewees had a cultural and linguistic competency, and when needed made use of interpreters. All participants were informed about the project and their possibility to withdraw from the study as well as receive psychological support if needed, without any cost.

³ 12 interviews from Oscar Larsson's post-doc project on *Integration in rural areas in Sweden*, The Department of Urban and Rural development at the Swedish University of Agricultural Sciences; and two interviews, with a nurse and a dentist, from an international project, Mig-HealthCare, a research project funded by the European Commission: Consumers, Health, Agriculture and Food Executive Agency.

2. Integration Policies

2.1. Brief Historical Background of Swedish Integration Policies

Historically, Sweden has been both a country of emigration and immigration with about one million of Sweden's population emigrating to America in the 19th century. However, since the mid-20th century, Sweden has primarily been a destination country. During the 1960's and 1970's, most migration to Sweden was labour-migration from Greece and Finland for example to cover the high demand for labour in Sweden's industry. The predecessor to today's Migration Agency, the State Immigration Agency (SIV), was formed in 1969, which then was responsible for both integration and immigration matters. In 1975 an important shift was the policy of multiculturalism, aiming to encompass cultural diversity and support minorities to safeguard their culture (for a more detailed elaboration of Swedish reception policies and integration see RESPOND WP4, Barthoma et al., 2020). From the 1980's and onwards, the character of migration shifted towards refugee reception, most notably as a result of the Balkan war in the 1990's, when Sweden received more than 100,000 refugees from the former Yugoslavia. In 2006, a legal reform introduced migration courts, and another law moved the responsibility for unaccompanied minors from the Migration Agency to the municipalities. The 2010's saw a steady increase in asylum seeker numbers, reaching a peak in 2015. In 2016, a number of new laws were introduced, which moved Sweden's migration policies from one of the more generous towards minimum levels in the EU (Migrationsverket, "Historik").⁴

The Minister for Integration (*Integrationsminister*) was a cabinet minister within the Swedish Government, established in 1996 until 2014. The responsibility areas were Swedish citizenship and discrimination due to religious and ethnic background. In the 1990's, criticism was voiced against the immigration policies for "lumping together" newly arrived immigrants with those with an immigrant background that had lived longer in the country. New ambitions for integration policies were established, where a more general multicultural ambition for all policies was expressed, while policies aimed towards immigrants as a group were to be more specifically targeted towards the newcomers to facilitate their first period in Sweden, a move "from immigrant to integration policies" (Prop. 1997/98:16). More recently, the language has once again changed, from a focus on integration to a focus on establishment, with the Establishment reform in 2010 (Lag 2010:197) that shifted the responsibility for the introduction of the newcomers from municipalities to the Swedish Public Employment Service (PES). Since the share of people with an immigrant background that were unemployed was much larger than the national average, this policy emphasised establishment on the labour market as the most important objective for integration policies: "In the past, integration efforts had to a greater extent been directed at social inclusion, cohesion and counteracting discrimination. Now paid work was formulated as the solution to immigrants' social exclusion" (Eriksson 2019, p. 19).

Although Sweden has not introduced language tests as part of naturalization policies, as many other states have done, language has been an important focus of integration policies: the *Swedish for immigrants* (SFI) language education that is

⁴ <https://www.migrationsverket.se/Om-Migrationsverket/Migration-till-Sverige/Historik.html>

available to all new residents has been in place since 1994, and is an important part of integration, as language proficiency is seen as a key to access other areas of society such as the labour market. Furthermore, children of immigrant parents have had the right to mother tongue education in some form since the 1960's, which is understood to have a positive effect on pupils' overall literacy and school performance (SOU 2019:18).

Today, the explicit goal of the Swedish government's integration policies is "equal rights, responsibilities and opportunities for all regardless of their ethnic or cultural background" (Regeringen.se). Related, but not synonymous to integration strategies, the Swedish government also has a long-term strategy to reduce and prevent segregation. In this strategy, long-term objectives to reduce inequalities in housing, education, labour market access, democratic participation, and personal safety are spelled out. The focus in the strategy against segregation is on socio-economic segregation, as most of the ethnic segregation has its foundation in socioeconomic inequalities (Regeringen.se).

2.2. Legal and Political Framework of Immigrant Integration

Sweden does not have one overall regulation concerning newcomers' integration into Swedish Society and the labour market. Sweden has governed the different aspects of the newcomers' integration through different strategies since the 1970s. A Ministry of Integration and Gender Equality was introduced in 2007 where the main goal of its strategy was to support the demand for labour and supply and equality in schools. In 2014, the governance of newcomers' integration was moved to the Ministry of Labour after the Ministry of Integration had been dissolved (European Commission 2019). Newcomers' integration in Sweden is regulated in several Acts and Ordinances such as the Act on the responsibility of measures for the introduction of certain newcomers (*Lag (2017:584) om ansvar för etableringsinsatser för vissa nyanlända invandrare*). The Swedish government realised after the unprecedented number of asylum seekers and refugees who arrived in Sweden at the end of 2015 that there was a need for legislative and administrative reform in relation to the process of newcomers' integration (Government Bill, 2016/7:175, p.31). On 6 April 2017, the Swedish government submitted a Bill to the Swedish parliament related to the responsibility for the integration of newcomers into society and the labour market (Government Bill, 2016/7:175). This Government Bill replaced the previous Act (*lag "2010:197" om etableringsinsatser för vissa nyanlända invandrare*) concerning the measures for introduction activities and programmes for certain newcomers with a new Act (2017:584) and made many other legislative changes in other integration-related regulations. The Social Insurance Act (*Socialförsäkringsbalken, 1994:1997*), Social Services Act (*Socialtjänstlagen, 2001:453*), The Unemployment Insurance Act (*Arbetslöshetsförsäkring, 1997:238*) and the Act of Civic Orientation for Certain Newly Arrived Migrants (*Lag "2013:156" om samhällsorientering för vissa nyanlända invandrare*) were some of these regulations.

With this Bill the government aimed to harmonise the legal framework for the newly arrived migrants to a great extent with the legal framework that applied to unemployed persons in Sweden (Government Bill, 2016/7:175, p.1). According to this bill, harmonization meant, among other things, those substantive provisions in the legal framework on establishment or integration efforts and individual compensation for newcomers to a large extent would be regulated at the ordinance level rather than by

law. During the time when the integration plan was being implemented, many actors within the field of integration criticised the effectiveness and efficiency of the previous legal framework. This situation was attributed to the slowness in ability to change since the related integration matters were governed by law and changing laws is usually a slow process in comparison to government ordinances in Sweden (Government Bill, 2016/7:175, p. 32).

Therefore, the need for an integration plan was removed and replaced with instructions for a single labour market policy programme. The education and job-training programme has become obligatory for the newcomers with new legislative changes from January 1, 2018. As a result, daily compensation cannot be paid if the newcomers do not pursue their education and job training. The management of the introduction allowance was moved from the Swedish Public Employment Service (*Arbetsförmedlingen*) to the Swedish National Insurance Agency (*Försäkringskassan*) (Government Offices of Sweden, 2019). The above-mentioned legislative reforms were a response to the current Swedish government's plan (Government Offices of Sweden, 2019) for integrating newcomers that was introduced during the electoral period between 2014 and 2018 with the following main headings:

- Same requirements for newcomers as for other job seekers or unemployed persons;
- Education and training are obligatory for newcomers;
- Enhanced work training as a measure within the introduction programme;
- Increased resources for civic information within early measures;
- Increase in funding for promoting the fast track programmes

2.3. Governance of Integration Policies: Policymaking and Implementation Level

At national level, one of the main actors responsible for integration is arguably the Swedish Public Employment Service (PES), as this government agency is responsible for coordination and implementation of the establishment of newcomers. The PES is responsible for making sure newcomers are offered initiatives that promote a quick and efficient establishment in the labour market, with particular responsibility for those between the ages of 20-65 (Lag 2017:584). According to the agency regulation, the Employment Service shall also have a coordinating, supporting and motivating role within the framework of its responsibility in conjunction with other relevant parties (Förordning 2007:1030).

At local level, most of social service implementation is the responsibility of the municipalities. Their part in integration is also substantial and has to do with all parts of access to the system for new residents, such as access to schooling, mother tongue teaching for children and arranging Swedish language education. In 2018/2019, 59% of the 298,600 pupils (28,1% of all pupils) eligible were receiving mother tongue education, with Arabic and Somali being the two most common languages. In addition, about 12% of all Swedish pupils were taking *Swedish as a second language* courses for those who do not have Swedish as their first language (Skolverket 2018). Municipalities are also responsible for social services and economic support for people who have no other means of support.

Though reception and integration of newly arrived has been the responsibility of the national, regional and local public authorities, the Swedish government adopted a policy in 2010 aiming at engaging civil society organisations in integration efforts (Osanami Törngren, Öberg and Righard, 2018). In this respect, the government provides financial incentives for activities promoting language learning, labour market integration, health, leisure time, and adult education activities. In 2015 the response by the civil society increased significantly, both for reception activities and for integration, thus complementing the work of authorities.

3. The Labour Market

The main goal of Swedish integration policy is to allow new arrivals to “establish” themselves, by providing services and facilitating access to work that will allow them to support themselves and their family. Labour market integration has thus become the main focus of integration policy in Sweden. Due to the demands of a high-skilled labour market, most of the policy is directed towards adult education and skills training in order to bridge the unemployment gap between the Swedish and the foreign-born population. This section will explore the implementation of policies and programmes directed towards labour market integration and highlight the experiences of newcomers.

3.1. Swedish Labour Market, Policy Developments and Main Actors

In 2015, the Swedish Economy was one of the fastest growing economies in the EU with an economic growth rate of 4 percent. Since then, Sweden has seen some significant economic slowdown, which has also affected unemployment (NIER 2019). The current unemployment rate is at 6,9 percent, just above the EU average. According to the National Institute of Economic Research unemployment will continue to rise. In December 2019 the participation rate of the working-age population was at 72,3 percent (Trading Economics 2020). Unemployment is heavily geographically dependent. The lowest unemployment rates are found in and around big cities such as Stockholm and Uppsala, whereas the highest are found in the Region of Gävleborg (Arbetsförmedlingen 2019). The labour market in Sweden is characterised by a large proportion of high-skilled work. Tamas (2019) points out that Sweden has the smallest share of jobs suitable for low-skilled employees of all EU Member states. This affects the unemployment rate of low-skilled workers. In 2019 the unemployment rate of foreign-born residents in Sweden was 15,4 percent, compared to 3,8 percent for Swedish-born residents (SCB 2019). Labour market integration thus goes hand in hand with access to secondary education, language training and vocational support.

Since 2010, policies directed at labour market integration have moved towards centralisation. With the Reform of the Establishment Act in 2017 (2017:584) the Public Employment Service or PES (Arbetsförmedlingen) took on the general responsibility for the establishment of newcomers in the labour market. Already during the asylum period, it starts mapping the asylum seekers’ skills (i.e. education and work experience) using a skills mapping tool. After the asylum decision, this skills-mapping helps with the development of an individualised establishment plan, which includes (a) Swedish for immigrants (SFI – Svenska för invandrare), (b) civic orientation, and (c) work preparation (e.g. validation, internship). This establishment plan is implemented in collaboration with other actors such as the counties and municipalities.

County Authorities are mainly responsible for coordinating language (SFI) and orientation programmes, which are funded by the national government, with the interest of ensuring successful entry into the labour market (Fratzke 2017).

The regulations that entered into force on January 1 2018, also aimed at harmonizing labour market integration for newcomers with those that apply to other job seekers (EMN 2017). In order to continue to target the large gap between

unemployment of native-born Swedes and foreign-born individuals the government plans on spending 56 million SEK in 2020 (Government Offices of Sweden 2019).

3.1.1. Access to Labour Market: Asylum Seekers and Refugees

For a more elaborated description see WP4 country report on Reception Policies, Practices and Responses: Sweden Country Report (Barthoma et al. 2020).

Work Permit for Asylum Seekers: Asylum Seekers can be exempt from a work permit, if they can prove that Sweden is responsible for their asylum application and if they can provide identity documentation. With the work permit exemption - AT-UND - asylum seekers are able to work immediately after arrival. As found in AIDA (2018), the exemption can cease to apply upon a final negative decision of the asylum claim if the asylum seeker cooperates with the Migration Agency to leave Sweden voluntarily. In a case where the person has been employed for four months according to labour market rules prior to the final decision there is a possibility to switch immigration tracks and apply for a work permit as a labour migrant. This application has to be made within two weeks of the final decision and a work contract for at least one year must be offered by the current employer on terms that meet the collective agreements signed by the unions. Another requirement is possessing a valid passport.

A successful applicant will receive a temporary residence permit of up to two years. After 4 years on temporary permits, a person who still has a job can then apply for a permanent residence permit, provided he or she has sufficient means to support and accommodate his or her family. These temporary permits allow for family reunification and the right of the spouse to work but do not require sufficient income to support and accommodate the family. This policy was introduced as part of an effort to allow highly qualified persons with required proficiency, knowledge and skills needed in Sweden, to access the labour market (AIDA Report 2018).

Fast Track for Refugees: In a similar effort to speed up integration of new arrivals with skills in occupations facing shortages, the government introduced several fast-track programmes for recognised refugees. Refugees with in-demand professional education or work experience are quickly moved into similar jobs in Sweden. As of March 2017, fast tracks were in place for social scientists, social workers, teachers, health-care workers, construction workers, wood workers, electricians, butchers and chefs. In addition, there are enhanced educational and vocational training programmes to provide relevant language skills and certifications individuals may be lacking. (Fratzke 2017). Generally, however, beneficiaries of international protection are able to work and live under the same conditions as all regular residents as they are issued with a permanent residence permit (Dessimirova et al. 2017).

Challenges: Labour market integration is most challenging for the low-skilled people. While the employment rate of the medium and high-skilled workforce has remained stable, unemployment has increased in the lower-skilled cohort and particularly among young people. This is an issue for asylum seekers, who are unable to work in sectors that demand certified skills such as the health sector, and in addition face barriers such as language requirements and a general lack of demand (Dessimirova et al. 2017).

The Establishment Programme: The “Establishment Programme” (Etableringsprogrammet) is aimed at facilitating introduction into the labour market and allowing immigrants to become self-sufficient as quickly as possible (Forordning

2017:820). It is open to adults above the age 20 on being granted asylum or obtaining an official residence permit. The programme lasts for a total of 24 months. In theory the Public Employment Service assesses each individual's qualifications and needs in order to design activities necessary for integration into the Swedish labour market. The full-time programme includes SFI classes, civic orientation courses, skills courses and career support and counselling, most of which are organised by the municipalities.

Since July 2016, the programme is provided under the adult education system, and may even be extended beyond the two-year introduction phase. Depending on their skills, qualifications and aspirations, migrants may also be referred for recognition of qualifications, validation of prior learning or entrepreneurial support (OECD 2016).

According to the OECD, the programme, tailored to individual needs, is effective in the qualitative but less so in the temporal aspect: "The programme is often too long for highly-educated migrants, while those lacking basic skills need a more flexible approach combining longer-term educational support with gradual introduction to the labour market". (OECD 2016, p.9) Moreover, the success rate of the programme in 2015 was limited especially for low-educated newcomers. 28 percent of men and 19 percent of women found a job within one year of finishing the programme (ibid.).

Since its centralisation within the PES, labour market integration has become the main focus of integration policy in Sweden, especially in order to bridge the unemployment gap between the Swedish and the foreign-born population. The Government's Budget Plan of 2020 includes a number of initiatives to support these efforts. Due to the demands of a high-skilled labour market, most of it is directed towards adult education and skills training (Arbetsmarknadsdepartementet 2019).

3.2. Implementation

The main goal of Swedish Integration Policy, is to allow newcomers to "establish" themselves, by providing services and facilitating access to work that will allow them to support themselves and their family. The "Etableringsprogram", the central pillar of Swedish Labour Market integration, describes this goal perfectly.

3.2.1. Cooperation between Actors

Several Actors are involved in the implementation of this goal. The County Administrative Boards play a central role and share the responsibilities of the reception and establishment of the newcomers with those actors; namely the municipalities, the Swedish Migration Agency and the Public Employment Service (Länsstyrelsen Stockholm 2020 a). The County Administrative Boards have the responsibility to support and follow up the municipalities' preparation and capacity to receive newcomers at regional and municipal levels. The County Administrative Boards provide also the financial compensation to develop cooperation among the municipalities and among the municipalities and other actors in order to facilitate the establishment of the newcomers (Länsstyrelsen Stockholm 2020 b). The Establishment programme itself is coordinated by the Public Employment Service. The latter has to cooperate with the County Administrative Boards and the subordinated municipalities, in the process of carrying out each individual "establishment plan". While the Public Employment Service is responsible for skills mapping, municipalities and county administrative boards must provide language courses (SFI), as proficiency in Swedish is a quasi-indispensable

prerequisite for successfully entering the workforce. In theory, municipalities cooperate with the PES receiving individual cases, and with employers and public institutions, to then match these cases with relevant jobs. Naturally the demand for work varies from municipality to municipality, with more urbanised municipalities such as Stockholm having a much higher demand for labour than more rural municipalities.

According to interviews with county officials, the cooperation between the PES and potential employers exists but is limited. Recruitment meetings do not happen often enough, and frequently employers cannot guarantee being able to employ the individuals in the future.

In large employment hubs such as Stockholm and Uppsala, cooperation is much easier and more facilitated. Here there are several cooperative projects between the municipalities and other public institutions such as the “From newcomer to newly-employed teacher” between Stockholm City & Stockholm University which facilitate integration into the labour market. Other municipalities have a hard time providing relevant jobs, resulting in many newcomers working in sectors far from their original expertise, as expressed in this remark: “Six out of ten work outside their profession in Sweden” (Public official, Länsstyrelsen).

The problem here is also the lack of effective communication between the multiple levels of governance. An officer from the county administrative board points out that they are unable to reply to the demands of the labour market (companies), because the PES is restricting access to information about refugee skills and capacity registered in their system.

This illustrates that the PES and the Regional institutions (Counties and Municipalities) are working past each other in certain areas and this may present a barrier for those trying to enter the job market. For instance, the municipalities' strong focus on language learning in the first two-years after arrival (through the SFI programme), may slow newcomers' acquisition of professional skills relevant to entering the job market in the future and to be able to support themselves. The PES, supposedly acting as a coordinator and “compass in the labyrinth” of job seeking, is hard to access and to navigate because of increased digitalization and lack of a physical meeting point for new arrivals.

3.2.2. Labour Market Integration: Barriers and Difficulties in Recognition of Qualifications

The most important barrier restricting labour market integration remains language. When the motivation to work is present, sufficient knowledge of Swedish is often highly restrictive, especially in jobs within the medical field. Proficiency in Swedish is essential even for safety reasons. The heavy focus on language education is therefore justified but does not come without challenges. A public official from the Municipality of Uppsala points out that “they are wrong about the two-year goal for people to establish themselves. It's too short.” (Uppsala Kommun). Meanwhile, municipalities are often criticised for not offering enough professional education early on and not allowing newcomers to learn while at work.

The Fast Track Programme for refugees is only relevant for highly-educated-refugees, mainly in the health sector. Vocational training, for less-skilled newcomers is

often “too difficult for the uneducated and too easy for the educated.” (SE_Meso_Interview_No7)

Lastly, the issue of exploitation of free labour also affects newcomers as they are often hired as interns but not hired later on, falling into a cycle of continuous internships - without entering a position lucrative enough to support themselves.

As mentioned in the Macro-Level Section, the Swedish-economy relies heavily on high-skilled jobs, making it hard for low-skilled newcomers to enter the job market: “The Swedish job market has a very high lowest level.” (SE_Meso_Interview_No6)

While work-permits are easily obtained, and mid-range-jobs acquired, licenses for high-skilled jobs such as doctors are much harder to access. In the case of licenses for practicing lawyers, there is little prospect for being able to transfer this. Moreover, even if skills and qualifications are mapped by the PES beforehand, it is highly unlikely for refugees to access a job that corresponds to their skills. This may cause a lot of frustration as in some countries of origin certain professions may be associated with a certain stigma making newcomers reluctant to accept certain offers.

3.2.3. Role of NGOs in Labour Market Integration

According to Hansen (2018) civil society is effective in bridging the gap between public services and beneficiaries for asylum seekers and refugees and in stepping in where the state system may have reached its limits or may be strained. In Sweden, civil society organizations, such as the Red Cross and Svenska Kyrkan, have effectively done so by providing reception services, such as early language courses, information sharing as well as legal and mental health support.

However, in the integration system especially when it comes to facilitating integration into the labour market the involvement of NGOs and CSOs is rather limited and remains mostly in the hands of the public domain.

In a discussion on integration support activities in Scania (Skåne) the southernmost region from Stockholm, CSO and NGO representatives, agreed “that the responsibility for providing integration efforts lies with the public sector and civil society organizations only have certain roles in integration activities” and that some welfare support and basic rights should be pushed back into the hands of the state (Tongren et al. 2018, p.19).

Most NGOs focus on helping newcomers establish a network. *ÖppnaDörren* is one of the main NGOs working to create connections between newcomers and Swedes. The subproject *Yrkesdörren* is specifically designed to match newcomers with established Swedes working in their industry (Pelling & Dahl 2017). *Tamam*, a Sweden-wide organization focusing on Youth and anti-discrimination initiatives organises start-up meetings to give young newcomers the opportunity to enter the labour market through entrepreneurship programmes. Professional exchange may exist in certain fields, Engineers without borders, for example, has established an “engineer to engineer” project that connects “progressive companies with newly arrived engineers and scientists to improve work and social integration”.⁵ Similar projects may exist in

⁵ Engineers without border: “Engineer to Engineer” program, available at: <https://www.ewb-swe.org/organisation>.

other industries, however this project has not specifically focused on research within the NGO Sector.

Civil Society Organizations can have a potential for linking newcomers and industry and may have a crucial role to play in improving labour market integration. In 2016 the Government released an official report highlighting the importance of dialogue with civil society, and announced New forms of economic partnership and state funding of civil society (SOU 2016:13 see also: Tornngren et al 2018, p.23).

3.3. Experiences of Refugees in the Labour Market

The importance of working – as a means to have an income that is more than the establishment allowance and to feel useful and provide for one’s family – is expressed in many of our interviews. Working gives a sense of psychological comfort, of feeling “like a useful person in the community” as seen in the quote below.

Interviewer: Are you working in Sweden? What is the nature of your work?

Respondent: Yes, I worked in a senior healthcare centre for a year to make money and to learn the language better. At this time I was following the integration programme. I found that life was difficult and expensive and I had to work so that I did not need help. After a year of working there, I felt the need to complete my education. I applied for a master's degree at Stockholm University. I was accepted. I stopped working, but after one year of studying, I felt tired. I could not finish. I decided to go back to work, and I found a job at the airport. I have been working for a year and a half at the airport.

Interviewer: Are you comfortable doing this kind of work or would you prefer to do something else?

Respondent: Of course, I do not feel comfortable because I always think that my place is not here. But it is a good job and in the end it gives me the psychological comfort to feel like a useful person in the community. Because without a job a person feels useless, mainly since I was not happy or satisfied with my Master's studies. (Syrian woman, Age group 27-50, No.2, Permanent residence permit)

In the quote above, one woman describes the transition from work to academic studies and then back to work, where having a job is discussed as bringing a sense of satisfaction.

As was also discussed in the macro level section above, there is a strong focus on labour market participation for newcomers in Sweden’s immigration policies. One question that this raises, which cannot be answered here, is to what extent the emphasis on getting people into jobs quickly after arrival creates or enforces the feeling that makes other alternatives (such as education) seem less acceptable. The experiences of labour market access among newly arrived refugees are discussed in the coming pages. Factors such as language skills and the Swedish Public Employment Service can work as both barriers to entry and facilitators, which is why this section is arranged thematically, discussing the experiences of one labour market factor at a time, rather than separating these into barriers and facilitators respectively.

3.3.1. The Role of Language in Access to Labour Market

In our interviews with refugees, there are a few experiences that are shared by many when it comes to how to gain access to the labour market. First of all, the importance of learning Swedish is without a doubt the most important issue and is mentioned by many of those we have interviewed. This can be a very negative experience, not being able to work to one's full capacity because of a lack of language skills. For some, the need to be able to speak the language has hindered them from getting a job they applied for, or hindered them from accessing much needed information:

I applied for a job and I knew that I was not going to get it because they asked for a fluent speaker. The applicants had spent around 20 years in Sweden. That was my first experience and I got to know how to deal with things. I was so stressed and others were calm. It was the first experience and I failed. It is not a failure and I am still applying for new jobs. (Syrian woman, Age group 27-50, No.29, Permanent residence permit)

Not knowing the language also combines with other aspects of finding oneself in a new country and in a context that is unfamiliar:

In Syria I was settled and I was working. In terms of language, it was my language. I could know the whole country. While here I have to start from zero. I don't know the language. I didn't know how to find a course. My driving license is worthless here. It requires effort. (Syrian man, Age group 27-50, No.16, Temporary residence permit)

As in the quote above, in order to find a work many of our interviewees express a will to make this effort, although it is difficult. That language skills are necessary to find work is a predictable problem, thus some of our interviewees have waited to apply for jobs until they learn the language. Asked about finding a job, a respondent answered: 'No, not yet because my language is not very good. I'm waiting to improve my language then I'll look for a job.' (Syrian woman, Age group 27-50, No.23, Asylum seeker) Despite many difficulties, once learning the language, many have experienced getting a job.

In addition to learning the language, some people experience that lack of social networks and familiarity with Swedish culture can constitute barriers to finding work:

There are a lot of barriers to getting a job. Here in Sweden, getting a job depends on your connections or if a person can help you to get the job. Of course getting a job also depends on the qualifications, experience and skills of the person. (...) Of course, the person can send in a CV, but in return, you cannot even get a reply with a word to thank you for applying for this job. I think if they look at the surname or first name they know this is a non-Swedish person, so they do not care about the application, but I cannot be sure if that is the reason. (Syrian woman, Age group 27-50, No.2, Permanent residence permit)

3.3.2. How the Swedish Public Employment Service is Perceived by Newcomers

As discussed above, the main responsibility in helping newly arrived refugees enter into the labour market lies with the Swedish Public Employment Service (PES). The Public Employment Service can provide information and access to many types of courses and

employment programmes. Thus, the help one gets there can be a main facilitator into entering the labour market. However, people experience the contact they have with the PES in many different ways. While some feel they have been much helped, others feel that they have not received sufficient guidance:

I tried a lot before I got work in the home care service and I decided to get an internship, but it was tough because there was not anyone who guided me or told me how to apply. The integration programme should have guided us, helped us to get a job or a home, and how we can integrate in Sweden, but that did not happen. I had a caseworker but this person was irresponsible. I did not get anything from this person. (Syrian woman, Age group 27-50, No.2, Permanent residence permit)

There are many who have experienced that they do not get the support they need, either because they find that the assistance is not well-organised for the given group of job-seekers, or because they feel that the PES did not have the relevant capacity to actually help them:

Interviewer: Did you face any problem in finding a job?

Respondent: Yes. Because I do not know the way to find a job. I asked the job centre and they told me to take certain steps. But to take these steps I needed help. [...] I don't know how to do it. (Syrian man, Age group 27-50, No.36, Permanent residence permit)

Interviewer: Has the PES helped you to find a training opportunity?

Respondent: I found it by myself, and when I went to the Job centre to consult them they were not cooperative, and they had no idea what was going on in the market or what they should advise me to do. (Syrian man, Age group 27-50, No.43, Temporary residence permit)

However, many also experience that they have been helped by the PES, and that they would not have been able to find employment without this help: 'Nobody would employ me without the Job centre.' (Syrian man, Age group 27-50, No.39, Permanent residence permit)

The PES has different programmes where they fund a part of the salary for companies who employ refugees. While this can facilitate entry into the labour market, it can also contribute to a sense of insecurity, as employment ends when the PES programme ends:

Once they employ refugees, the company receives financial aid from the Job centre. And our contracts are linked to a second company for which we work as consultants and we get our salaries from the first company. So, the Job centre financial aid was the revenue. (Syrian man, Age group 27-50, No.38, Temporary residence permit)

Short-term contracts with no real safety, internships or employment where the salary is paid by the PES, are often terminated when the time is up, leaving people feeling exploited and insecure in their place of work:

The only difficulty is finding a job. I have a language certificate and driving license but they still prioritise another person. The state has no control over it because it's up to the business to choose you or not. You can take Job centre statistics; most people work for one or two years during the period of the state financial support, then their job is terminated. [...] There are major obstacles. I left my job but that

position doesn't have a future. They would have renewed my contract for a short period. The need for that job is temporary, so I wanted to continue my studies to find long-term employment. (Syrian man, Age group 27-50, No.14, Temporary residence permit)

Some even experience that companies that employ them rescind on initial promises of employment, which leaves them with a sense of being exploited:

They were not true to their words. [The employer] told me in the beginning that they would train me for a month, then they will provide me with a three-year contract, which changed after one month. Because from the beginning they told me I would get a three- year contract after one month of training. But if they said to me from the beginning six months, I would have agreed with them for six months, but they wanted to get the benefit of the support of the Job centre. I felt that they were exploiting me. Otherwise, if I got the contract I would have changed my permission to stay from asylum seeker to a work residence permit and open many fields for me and work. (Syrian man, Age group 27-50, No.7, Temporary residence permit)

Another example where employment is terminated after PES funding has ended:

For unclear reasons they told me we are satisfied now and we don't need you anymore although they promised me long-term employment. After six months, my contract was terminated as with four of my foreign friends and they employed Swedes instead. (Syrian woman, Age group 27-50, No.24, Permanent residence permit)

Insecure employment and precarious work with zero hour or short-term contracts are a development that has drastically transformed the Swedish labour market in the last decades. Today, about 15-17 percent of all jobs are temporary jobs without employment security.⁶ The share of temporary employment is much higher among the youth and those with immigrant background, around 33 to 26 percent respectively. According to Statistics Sweden, those with temporary employment are much more worried about losing their jobs, 36 percent compared to only 8 percent among those with secure employment (SCB 2019). Although this development is taking place across the board, it is particularly those that already have a weak position in the labour market/high unemployment rates (youth, low-skilled, immigrant) that are affected by this development.

3.3.3. Discrimination and Gender Dynamics

Some express having negative experiences in the labour market that are the result of discrimination, such as in this example, where even someone who has a university degree and has grown up in Sweden, however, with a migrant background, has a hard time finding employment:

For example, my 22-year-old granddaughter is a construction engineer and her language is excellent. She studied in Swedish schools since she was 11 years old and could not get a job. In addition, there is a refusal to [employ someone] for racist reasons, when they see that the name is Arabic. (Syrian woman, Age group 50+, No.28, Permanent residence permit)

⁶ <https://www.ekonomifakta.se/Fakta/Arbetsmarknad/Sysselsattning/Tidsbegransat-anstallda/>

When it comes to labour market access, there are some experiences that differ between men and women. For women, the move to Sweden can sometimes be a liberating experience, where one is able to work and participate in society to an extent that was impossible in Syria for example:

In our country, men can prevent women from working. Here they cannot. Women here can apply for all jobs. I even applied for a job in construction. In Syria women cannot work in construction. They take it to show mercy for women as it is a tough job. And it is a shame to do it. Here women wear the same clothes as men and they are equal. (Syrian woman, Age group 27-50, No.29, Permanent residence permit)

Another example of this:

Respondent: The positive aspects are related to the fact that I wasn't able to complete my studies and get a job, I was prevented due to certain circumstances, but now I can have a job.

Interviewer: What were these circumstances?

Respondent: My husband didn't allow me to get a job in Syria or complete my studies, I mean I should stay with the children all day, now my children can go somewhere. (Syrian woman, Age group 27-50, No.33, Permanent residence permit)

On the other hand, there are also women who experience that they have not been able to work because their responsibility for taking care of children keeps them at home:

I was not able to because I have my daughters, and I am responsible for them. I have to take care of them. (Syrian woman, Age group 27-50, No.13, Permanent residence permit)

What these examples show is that there are some gendered experiences of the labour market, but that these are not the same for all women and can be both positive and negative in terms of access to the labour market and feeling empowered.

3.4 Summary

As seen in Table 1, an overview of our Swedish interview material shows that the last job performed in the country of origin was mainly reported as specialist (n=17, of which 59% men). When compared to their current work in Sweden, the majority responded they were unemployed (n=38, of which 55% women), followed by a small number (n=7) working as specialists (the majority men, 86%). Currently, 22 respondents (36%) report they work to earn their own money, among which the majority being men (68%). Experience of any form of discrimination in the labour market in Sweden was reported by 18 respondents (30%), of which the majority were men (61%).

Table 1. Labour market, by frequency and percentage

Last job performed in the country of origin		
Unskilled worker (e.g. maid, waiter, kitchen help, agricultural worker, cleaner, babysitter)	4	7%

Skilled worker or craftsman (e.g. welder, machine operator, qualified bricklayer, tailor, nurse, operator of agricultural machinery, forester)	4	7%
Service employee or salesperson (hairdresser, beautician, cook)	5	8%
Office worker, a technician and other middle-level personnel (secretary, electrician)	7	11%
Specialist (lawyer, doctor, bookkeeper, lecturer, IT specialist, teacher, translator)	17	28%
Manager/supervisors/director	4	7%
Self-employed	5	8%
Unemployed	9	15%
Not applicable/No response	6	10%
Currently working to earn own money		
No	37	61%
Yes	22	36%
Not applicable/No response	2	3%
Current job in the host country		
Unskilled worker (e.g. maid, waiter, kitchen help, agricultural worker, cleaner, babysitter)	1	2%
Skilled worker or craftsman (e.g. welder, machine operator, qualified bricklayer, tailor, nurse, operator of agricultural machinery, forester)	3	5%
Service employee or salesperson (hairdresser, beautician, cook)	3	5%
Office worker, a technician and other middle-level personnel (secretary, electrician)	6	10%
Specialist (lawyer, doctor, bookkeeper, lecturer, IT specialist, teacher, translator)	7	11%
Manager/supervisors/director	0	0%
Self-employed	0	0%
Unemployed	38	62%
Don't know	3	5%
Experienced any discrimination in the labour market in the host country		
No	8	13%
Yes	18	30%
Not applicable/No response	35	57%

To conclude this section, the labour market experiences vary greatly. While some have been able to find work since they arrived or since finishing language introduction, for others it is more of a struggle. All seem to have had access to labour market introduction and establishment programmes from the PES, but it has not always been helpful. Overall, unemployment rates among “foreign born” remain markedly higher than among

those born in Sweden. In 2019 the unemployment rate in these groups was 15,1 and 4,4 percent respectively (SCB 2019). An overall impression, from both policies and experiences among our interviewees, is that acquiring Swedish language skills is of major importance for labour market establishment.

4. Education

Education being one of the strongest pillars of the Swedish integration system, this section will explore formal education, non-formal education, and education from the perspective of asylum seekers and refugees.

During the asylum process, adult asylum seekers are only provided with informal or semi-formal language courses. Upon receiving a positive decision for their asylum application, they have the right to access formal education, which starts basically with language acquisition. A variety of language courses provided by different institutions, inter alia, the municipalities, organise the language courses within the concept of introduction programmes, Swedish for Immigrants (Svenska för invandrare, SFI). Several other institutions provide similar language acquisition courses as part of sprinter/fast-track programmes for higher educated migrants. The schools generally offer intensive Swedish-language instruction alongside core subjects taught in students' mother tongue. In Stockholm, courses are taught in six-week increments and students are assessed at each stage, making it possible to adjust their course loads and assess whether they are ready to move into mainstream schools. Students are expected to transition into mainstream classrooms after two years at most (Fratzke 2017).

4.1. Formal Education's Current Situation and Challenges

As Sweden received a large number of migrants in 2015, education was clearly a focal point in the years following. Not only did access to primary and secondary schooling become a priority, adult education also became more and more central given the high unemployment rates among newcomers.

In 2018, Sweden had 4,834⁷ primary schools; 1,307 upper secondary schools⁸ and 39 universities (Statista).⁹ According to data from 2014, 83 percent of female and 91 percent of male unaccompanied minors (UAMs) are enrolled in school. 68 percent of female and 69 percent of male accompanied children are enrolled in school (Çelikaksoy and Wadensjö 2019).

4.1.1. Access of Refugees and Asylum Seekers to Formal Basic Education

During the asylum period municipalities are responsible for providing education to all newcomer children under 18, and for the UAMs. Asylum-seeking and refugee children have full access to the school system even during the asylum process. Under the Upper Secondary Education Act (2016), once a course has been started teenagers are allowed to finish it, even though their temporary residence permit may have expired before the course ends: "The right to go to school has also been confirmed in law for those children still present in Sweden with an expulsion order and who have absconded with their parents."¹⁰ Children under-18 who seek asylum have full access to the school system even during the asylum process. Asylum-seeking children have the right to

⁷ <https://www.statista.com/statistics/539304/sweden-number-of-upper-secondary-schools/>

⁸ Upper secondary school (gymnasieskola in Swedish) is a voluntary upper secondary education for children between age 16 and 19.

⁹ <https://studyinsweden.se/universities/>

¹⁰ Cited from FARR report on 'Reception': Betänkande 2012/13:UbU12 Utbildning för barn som vistas i landet utan tillstånd, available at: <https://farr.se/sv/71-om-farr/204-skolgang-foer-goemda>

attend school in Sweden, and schools are required to enrol newly arrived children, including asylum seekers, within one month of their arrival. They are integrated into regular schools. Preparatory courses are offered for those who have to improve their skills in Swedish and core subjects. Another important measure is the right for mother tongue education. If more than five children who speak the same language live in the school district, they have the right to have lessons in their mother tongue on a regular basis. This measure helps to improve their performance in school and learning Swedish (Barthoma et al. 2020).

Some larger districts, including Stockholm and Malmö, have created “sprint” and “start-up” courses, so called because they are designed to help students who do not speak Swedish during the first year or two of arrival. Within this programme the schedule is mixed between regular classes and preparatory classes. Depending on the students’ development there will be a gradual transfer into a regular teaching group. As soon as the student is able to follow the teaching of a particular subject, s/he is moved to the regular class. Following a regulatory change in August 2016, schools are now allowed to contract with digital providers or other schools for mother-tongue instructional services. The National Agency for Education is also exploring the possibility of using online learning to supplement instructional capacity in other subjects (Fratzke 2017).

4.1.2. Access of Refugees and Asylum Seekers to Secondary Education

The government tasked the Swedish National Agency for Education (SNAE) to present proposals regarding upper secondary school and adult education. The government’s objective is that all youths start and complete their upper secondary school education. Another key measure is to facilitate matching, connecting foreign-born job seekers with employers.

Apart from the age limit - upper secondary education should begin before the end of the first half of the calendar year you turn 20 - access to upper secondary education is tied to a number of requirements:

1. Newcomer students must have a pass grade in Swedish or Swedish as a second language, and in English and maths.
2. Newcomer students need to have pass grades in five other subjects in order to apply to a vocational programme.
3. Newcomer students need to have pass grades in nine other subjects in order to apply to a programme that prepares you for higher education. These programmes specify what some of the nine subjects have to be (Denkelaar 2018).

In terms of legal regulations, the government has implemented policies to gradually reduce barriers that challenge access to upper secondary education. Under the Upper Secondary Education Act (2016)¹¹, once a course has been started teenagers are allowed to finish it, even though their temporary residence permit may have expired

¹¹ Ordinance on supplementary teacher education that leads to a Degree of Bachelor/Master of Arts/Science in Secondary/Upper Secondary Education for people with a third-cycle qualification (2016:705).

before the course ends.

This law also introduced a residence permit that allows applicants to continue their studies. A multitude of rules exist here for different categories of immigrants with a refugee background. Residence permits can be granted for 13 months up to four years for certain categories of young asylum seekers pursuing upper secondary education (subject to certain conditions). It is possible to get a permit that is valid for six months after finishing the programme. Since this applies to everyone under 25 (between age 17–24, not only to unaccompanied children) it is possible to apply on the ground of upper secondary studies regardless of whether they came with their family or alone. The date to apply for a residence permit for upper secondary school studies under the new law was from 1 July to 30 September 2018 (recently the SMA has reopened the application process).

4.1.3. Challenges Impacting Performance of Students with Migrant Background

Despite efforts to integrate students with migrant background, Sweden ranks among the worst countries, when it comes to the performance of asylum seekers (OECD 2016). Immigrants are five times more likely than non-immigrants to repeat a grade, and eight times more likely to do so before taking into account the socio-economic background and language spoken at home. This educational performance disparity is linked to a number of factors, most importantly the uneven settlement of migrants among municipalities and socio-economic disparities.

The logistics used in the distribution of migrant families among municipalities has resulted in a toll for both schools and students. In 2017, 10 percent of all schools in Sweden took in 43 percent of newcomer students. Taking into account size and population, smaller municipalities receive proportionally most newcomer students in their schools. The strain on organization and infrastructure is immense, which may affect the students' development and learning, some researchers argue (Denkelaar 2018).

Segregation is a major factor in Sweden in terms of equal access to education. The SNAE concludes that in schools with a larger proportion of students with a favourable socioeconomic background, the results tend to be higher than for students with less favourable conditions (Denkelaar 2018, see also: Skolverket 2012 chapter 6, Skolverket 2016). Since refugees tend to reside in suburban areas and areas where schools have lower academic standards, this may impact their participation and education outcomes overall (UNHCR 2019).

4.2. Non-Formal Education

4.2.1. Language Learning: Swedish for Immigrants

As discussed above, both government agencies and refugees perceive learning Swedish as the most important factor for getting employment on the Swedish labour market. Integration policies have long been focused on language training as a main tool for integration into Swedish society, although recent changes in integration policies have somewhat shifted focus towards labour market participation as its main focus. The introduction to Swedish is provided by Swedish for Immigrants (SFI) which is available

(and mandatory if one wants to receive financial compensation) for all who have residence permits (Barthoma et al. 2020).

Swedish for immigrants is a programme that allows adults, or any newcomer above the age of 16, to study Swedish. It is intended both as a preparation for integration into higher education or the labour market as well as an introduction to Swedish society. The programme is designed and funded by the Swedish National Agency for Education but organised and offered by the municipal adult education divisions, called KOMVUX (Kommunal Vuxenutbildning).

Both municipal adult education schools and private school providers such as Folkuniversitet can provide SFI. In order to access free SFI classes, refugees must legally reside in Sweden, be registered with the Swedish Tax Agency, have a personal identity number and have reached the age of 16. Courses are offered at levels from A to D, which each finish with an examination. Students can enter each level, based on a placement assessment. SFI courses are flexible and can be combined with studies and work programmes.

During the first two years of residency (after being granted a residence permit), each individual receives an establishment allowance from the Swedish Social Insurance Agency. However, many people need additional funding because they cannot manage on the establishment allowance alone, and thus either find work or seek economic support (Försörjningsstöd) from the municipality they live in. According to the establishment coordinator (*Etableringssamordnare*) of Uppsala municipality, most people want to study or work to occupy themselves and get established in Sweden, but often establishment takes longer than the time specified by the PES. In particular, people with special physical needs, or who do not make progress in learning Swedish in SFI, and (women) on parental leave for longer periods, will often need much more time before they can support themselves (SE_Meso_Interview_No3).

This issue was also reflected in our interview with a representative of the County Administrative Board (*Länsstyrelsen*). The county in Stockholm, works as a mediator between the state directives and the municipalities in their county that are responsible for implementing these directives. They can also coordinate some of the efforts in the municipalities they cover. Concerning SFI, the funding is fixed and often not enough, as the needs of individuals can differ considerably depending on their previous knowledge. Our interviewee argued that if you invest enough in people, they will eventually find work, but it requires policy, resources and funding. They also suggested that this responsibility should be regional rather than municipal, as scale advantages would allow for more SFI classes tailored to individual needs. "The municipalities are too small to help people establish themselves in a new country" (SE_Meso_Interview_No6).

That the scaling up of SFI brings advantages is also evident in meso-level interviews with project managers in the Stockholm region. Due to the large numbers of refugees in larger cities, it is possible to tailor SFI programmes specifically to groups with different educational backgrounds. But even when such division is possible, a problem that is highlighted is the fact that SFI classes have a "rolling intake", i.e. they are not fixed courses, which means that new people can enter the class at any time, something that is detrimental to overall progression (SE_Meso_Interview_No5).

4.2.2. Other Courses of Non-Formal Education

In Sweden, the civil society study associations and folk high schools offer two types of courses aimed at asylum-seekers in the early period of arrival. This is mainly done in two types of study circles, *Swedish from day 1* and *Everyday Swedish*. The main objective of these efforts was to introduce an opportunity to learn Swedish *before* having a decision and thus being able to enter into the Swedish for foreigners (SFI) programme. The Swedish National Council of Adult Education is the umbrella organization of civil society adult education, and has been delegated the task by the government of distributing funding for this purpose to local adult education associations. The *Swedish from day 1* and *Everyday Swedish* courses are arranged in a large majority of municipalities (Folkbildningsrådet 2019).¹² As the target group for these study circles is primarily newly arrived people living in Migration Agency housing, this was covered more extensively in the WP4 report on Sweden (Barthoma et al. 2020). However, the adult education associations have extensive programmes in many subject areas (e.g. art, music, history, cooking) and have almost one million participants yearly across the country. Out of all their participants, 21,4 percent are foreign-born, which means that there are many who participate in study circles also after becoming Swedish residents (Folkbildningsrådet Annual report 2018).¹³

4.3. Education from the Perspective of Asylum Seekers and Refugees

4.3.1. Formal and Non-formal School Education for Children

All children have the right to attend school when waiting for an asylum decision. There are different experiences as to how easy it is to get access to school, sometimes because of lack of information or knowledge about one's rights. In the first quote below, the distance to school is also considered a problem of access, which can be the case where refugees are placed in a rural area (perhaps where most children in the area have long journeys to school):

And about school I have a negative experience with this because one of the staff in the municipality gave us wrong information, so we waited a long time for a place and finally we got a response from the school but it was far away from us, and that person who works in the municipality told me that the distance to school is long and needs an hour to go and an hour to return. At the same time we wanted a solution for our children's situation because they were at home all the time. But what happened, that person did not tell us, or refused [to tell us that] the school had a waiting period for new admissions of six months. I think the reason that prevented him from giving us complete information or incomplete, is for discriminatory reasons. This is what I think. (Syrian man, Age group 27-50, No.27, Permanent residence permit)

¹² Folkbildningsrådet, *Folkbildning med asylsökande* (2019), can be downloaded at <https://www.folkbildningsradet.se/om-folkbildningsradet/publikationer-och-remissvar/rapporter/Rapporter-till-regeringen/rapporter-till-regeringen-2019/>

¹³ <https://www.folkbildningsradet.se/om-folkbildningsradet/publikationer-och-remissvar/Arsredovisning/>

But it can also be a fast process to get access to school:

The first point my husband mentioned is that we want our kids to go to school because it's tough to live without doing anything. He told them that we have fingerprints in Germany [country of arrival before Sweden] but it's not my kids fault to stay out of school. After a week, my kids were registered in school. (Syrian woman, Age group 27-50, No.10, Temporary residence permit)

As discussed in the earlier, Swedish schools are rather segregated, with a disproportionate number of immigrant pupils in some schools. For the young people who arrive in Sweden and enter high school, even though they have access to education, as a result of the distribution of pupils with immigrant backgrounds a problem can arise when they end up in a school with almost no native-Swedish speakers. This can make acquiring language skills very difficult:

Interviewer: Are you involved in the integration programme?

Respondent: No, because I was under the legal age but when I came to school on the basis that it was a Swedish school, but the vast majority of the students were Arabs or Swedish but originally Arabs.

Interviewer: Do you think this was negative or positive?

Respondent: It was negative, of course, because even if they were fluent in the Swedish language, they would speak to me Arabic because this is easier for them and for me to understand each other. But this affected the reason for being at school. (Syrian man, Age group 18-26, No.22, Family reunification)

For those students who arrived in Sweden when they were still of high school age, initial experiences of attending school might have been positive with a motivation to learn. However, if they then received a negative decision on their asylum application, the experience could be very distressing and disproportionately harmful for that age:

When we came to Sweden, even before we started school, I was learning the language and I tried my best to learn the language and also continue to study. I had access to high-school, but now that we got rejected, I am very confused and I do not know what to do. [...] I am very confused, because they told me I have to leave the country. I want to be a doctor. They took away my asylum seeker card, I am going to school but they want me to leave the country. [...] Now I am living in Sweden illegally. (Afghan woman, Age group 18-26, No.55, Asylum seeker in deportation stage)

Another example:

(Respondent is crying) Yes, I used to go to school until the New Year, but then I got the papers from immigration telling me I had to leave my home and my family because I turned 19. I have to leave my apartment. They sent a brief letter saying I have to leave the country and move on to stand up on my own two feet and I am not allowed to continue to stay with my family. I have to leave the country. (Afghan woman, Age group 18-26, No.57, Asylum seeker in deportation stage)

4.3.2. Tertiary Education

There are a few different experiences when it comes to participation in tertiary education. In our interviews, some mention that they appreciate being able to study at university after arriving in Sweden:

Sweden and Europe in general are a dream for the Arab citizens. But we initially refused to go to Sweden because we were forced to leave our country and feel lost. I currently love Sweden a lot but I also miss my country Syria and its people. The circumstances are difficult because we started a new life. Sweden gave me the opportunity to complete my studies at one of its renowned universities, which is a dream for anyone and I appreciate this grace so as not to lose it as we lost our country. That's why I see life here from a positive perspective and am satisfied with it. (Syrian woman, Age group 18-26, No.31, Permanent residence permit)

One interviewee mentioned opting for studying in English at university rather than taking Swedish courses:

I discovered that I could complete my university studies in English and did this. [...] I did not do any [establishment programme] courses. I was studying at the university and if I felt I needed a particular subject or knowledge I will study it at the University of Stockholm, which is much better. (Syrian man, Age group 27-50, No.3, Permanent residence permit)

Once people receive residency (permanent or temporary), attending university is free of charge (as it is for Swedes and EU/EEA citizens), and they are able to take student loans (CSN).

4.3.3. Language Learning and Experiences in the Establishment Program

If labour market access to a very large extent is dependent on one's ability to learn Swedish, then the introductory language education – the right to two years of SFI after receiving residence permit – is perhaps the most important tool to make this happen. Yet, experiences of Swedish for immigrants (SFI) are very varied, as the programme can work really well for some but be experienced very negatively by others. For example, a recurring argument in our interviews is that SFI is too slow, and not adjusted to previous knowledge and level of education:

My opinion about the SFI school isn't very positive. As I told you instead of two years I'd prefer that the time was shorter and the career language learning is given much more time. Maybe the Job centre would send you to a career course but they won't send you until you finish SFI and this is a wrong method in my opinion because it's possible for you to learn the alphabet and some things in six months and you'll learn the language from your career. It would be better this way. You'll learn the career language faster. I have a lot of reservations on certificates of equivalence here. It's a very hard thing. (Syrian man, Age group 50+, No.19, Permanent residence permit)

Others experience that the way SFI was organised did not help them in learning the language sufficiently. When asked about the experience of integration program, one of the respondents answered in the following terms:

This programme did not help me much because we spent two years learning the language, so I did not get out of that with high [enthusiasm]. I learned German and Hungarian before, and I did not find it that difficult but the principle here in Sweden

was strange for me because I found it to be messy and disorganised without a good teaching plan. They rely on a self-study programme. (Syrian man, Age group 27-50, No.9, Permanent residence permit)

For others, SFI is a positive experience that helps in learning the language by allowing for the language learning to take some time. When asked about integration program and its importance, two Syrian women expressed that:

Yes, I think it is essential, even if it does not help us integrate into Swedish society well. But it was a pretty good start for me, especially as the person can get money and education at the same time. (Syrian woman, Age group 27-50, No.2, Permanent residence permit)

Here it's good that you go to school and not immediately into work, which is better. You have a better understanding of the language. (Syrian woman, Age group 27-50, No.26, Family reunification)

Learning a new language is hard – many of our interviewees experience learning Swedish as difficult. Reasons for struggling to learn the language are many, sometimes related to the structure of the education, sometimes related more to personal struggles. One problem that comes up in our interviews is that attending SFI, or living only with other immigrants, means that there is no possibility to come into contact with Swedish speakers on a daily basis. (Partly) for this reason, some mention learning Swedish at work as more desirable:

For example, instead of a person taking the SFI for two years, it's possible that he can learn the language basics in six months and enter his own career, he'll learn the language which is related to his career there. [...] The school isn't the right place because it's full of foreigners and after the class you would speak your own language. I've been working for the last seven months, I'm working in a department full of Swedish speakers. I learned more language in these six to seven months than in the three years I spent in the school. Here I'm speaking Swedish for nearly six to seven hours a day. So, my relations and my language have improved a lot. I started to understand what they were speaking about and also to express myself. (Syrian man, Age group 50+, No.19, Permanent residence permit)

And others mention that they finish SFI before acquiring Swedish language proficiency because they are in need of the income that a job provides, but they continue their independent learning of Swedish at work:

Interviewer: Did you attend any professional or language courses?

Respondent: No.

Interviewer: Did you take Swedish courses?

Respondent: I took courses at SFI. I didn't finish it. I finished at C level because I needed a job.

Interviewer: Are you improving your language?

Respondent: Yes, at work. (Syrian man, Age group 27-50, No.39, Permanent residence permit)

Experiences of learning the language through participation in SFI differ. For some it is the way that they have learned Swedish, and they feel that it was useful. For others,

negative experiences of SFI are both that it takes too long and is not divided into different levels of competence, for example as a young person who learns much faster than older participants, or that university educated are grouped with those who are illiterate. As the two quotes below show, this can be experienced both by a young man who feels he could have learned much faster, and by an older man who feels he needed more time:

It's very important, but the challenge is the Swedish language, that they have to differentiate between ages, that is my own opinion. For example, I'm 29 years old and I was studying with a person 50 years old, so I understand the information faster. For the 50 year old man the lecturer has to repeat the information several times for him to understand, so that affected my time. When they group similar ages together that would be more convenient, that is my personal opinion. (Syrian man, Age group 27-50, No.44, Permanent residence permit)

And while describing his experience, the older person stated:

The teachers in the first month are always serious about the course but after that they just tell us to open the book to read, translate, and answer the questions. I do not want to answer the questions. I wish all of the programmes to follow the common state. The teacher taught students a Swedish sentence "I could not understand it". The next day in the morning, the first thing that the teacher said was to repeat the same sentence. In that way they won't forget it. Here the teacher tells us to open the language book, page 70, and to read and answer the questions. We won't learn like that. We need to learn what to say when we go to a dentist. Do not look to the young people under 20. I am 50 years old and I won't learn without repeating. (Syrian man, Age group 27-50, No.15, Permanent residence permit)

These examples reflect what was also expressed in the interview with the representative from Uppsala municipality above, that the integration programme and two years of SFI is not the best fit for everyone, as some people need more time to learn the language. Another experience of this can be seen in this quote from a woman who, having family responsibilities, felt that two years was not enough to learn the language:

When you first come here it is difficult to figure things out. It is really difficult to make things work here so it helps to get used to the rules. So you can work, study and continue [your] life. In my opinion, they should make it longer for the newcomers and for [those who] have family. So instead of two years it should be three years. (Iraqi woman, Age group 27-50, No.46, Permanent residence permit)

Information on language learning reveals both possibilities and issues, but one important point for learning is the further need for individual adaptation in the learning procedure.

4.3.4. Rural and Urban Challenges in Education for Immigrants

As mentioned above (in meso interviews), the ability to provide enough different levels in SFI is dependent on the numbers of newcomers in the same area. So for example, the experiences of SFI for someone with an academic background who lives in a big city region such as Stockholm, might be a very different experience from someone who lives in a smaller city/rural area, as in the quote below:

In my city there is no splitting up between uneducated people, and that's the system in my area. Maybe there's not enough teachers. But for me I have to attend SFI and take it seriously. They can divide these people into different categories without making them attend for 40 hours. Some people just go to sleep in SFI because it's about the state and professional training. (Syrian man, Age group 27-50, No.14, Temporary residence permit)

4.4. Summary

As seen in Table 2, our interview material shows that a majority of respondents have attended a language class (n=45, 74%), of which 28 men (62%). But, 44% attended a vocational course or training (n=27, of which 56% men). Additionally, 25 respondents (41%) have obtained the host country language certificate, of which the majority women (52%). Of those who have children under 18 attending school (n=23, 38%), the majority are women 65%). Additionally, a majority (61%) were satisfied with the region they are currently living in, of which mostly men (n=24, 65%).

Table 2. Education, by frequency and percentage

Offered a language class		
No	8	13%
Yes	45	74%
Not applicable/No response	8	13%
Attended a language class		
No	11	18%
Yes	45	74%
Not applicable/No response	5	8%
Offered any vocational course or training in the host country		
No	11	18%
Yes	23	38%
Not applicable/No response	27	44%
Attended a vocational course or training in the host country		
No	13	21%
Yes	27	44%
Not applicable/No response	21	35%
Obtained the host country language certificate		
No	17	28%
Yes	25	41%
Not applicable/No response	19	31%

Have any children under 18 attending school in the country of arrival		
No	35	57%
Yes	23	38%
No answer	3	5%

Summing up the interview content, access to education is good, as all newcomers are able to participate in SFI and as residents have access to schools and universities like everyone else. The experience of education differs for many reasons - for adults, previous levels of education often seem to influence how easy it is to learn the language, and one's experience with SFI. Significant age difference is neglected, this in turn affects educational interest and performance of the students of different generations studying in one group. Both younger students in school districts with many other immigrants, and adults in SFI, experience that it is harder to learn the language when people around you are not native Swedish speakers. Working with Swedish speakers seems to be a way to learn the language for some.

5. Housing and Spatial Integration

Housing in general is a major challenge for all Swedes, resulting in segregation in society and with labour as well as educational consequences, affecting newcomers strongly. This section highlights newcomers' experiences in housing and the links to integration, as well as stakeholders' views. Newcomers' perception of belonging in the neighbourhood, experiences in the housing market, and problems they are facing are also presented.

5.1. Housing Policy

The Swedish Migration Agency (SMA) is responsible for asylum seekers up until they receive a residence permit, after which the municipality has the main responsibility.¹⁴ In terms of housing, from the time of arrival up to the point of decision, there are two main alternatives: to live in accommodation provided by the SMA (at a reception centre or in apartments, called ABO) or to live in private accommodation (called EBO) that one arranges for oneself, which often means staying with relatives or friends already in the country. If the person lives in housing provided by the SMA, she/he will then be placed somewhere in the country without the possibility to choose the location. Because EBO and other factors have led to the situation when some municipalities were receiving many more immigrants than others, in 2016, new legislation was introduced through the Settlement Act (2016:38)¹⁵. The new legislation made it possible for the government authorities to assign a certain share of refugees to the municipalities, for the purpose of making the responsibility more evenly distributed among different municipalities. In accordance with the Settlement Act, the allocation of newcomers must take into account the municipality's labour market conditions, population size, total reception of newcomers and unaccompanied children and the number of asylum seekers staying in the municipality. In 2017, 43 percent of the asylum seekers enrolled in the system had arranged their own accommodation (EBO), and 46 percent relied on ABO. The remaining 10 percent were accommodated in other, specialised facilities related to their needs. (Barthoma et al 2020, p. 27). Since January 2020, new legislation that restricts the possibility to arrange housing through EBO has been introduced. The purpose of this new legislation is to restrict asylum seekers from settling in socio-economically weak residential areas, and thus encourage settlement in areas where labour market opportunities are better. If someone still chooses to settle in an area with socio-economic challenges, they can lose the right to daily allowance during the asylum period¹⁶. During the period of the peak in arrivals, 2015-2016, many new reception centres were opened that have later been closed, as arrivals of asylum seekers have fallen below the level before the "refugee crisis". More details of housing during the reception period can be found in *Reception Policies, Practices and Responses: Sweden Country Report* (Barthoma et al 2020) that extensively covered this issue.

After receiving a decision on permanent residency, former asylum seekers are no longer allowed to live in SMA housing, and it becomes the responsibility of the municipality to assist them in finding a place to live if they cannot organise their own housing. During these years, the housing issue has been complicated by the fact that

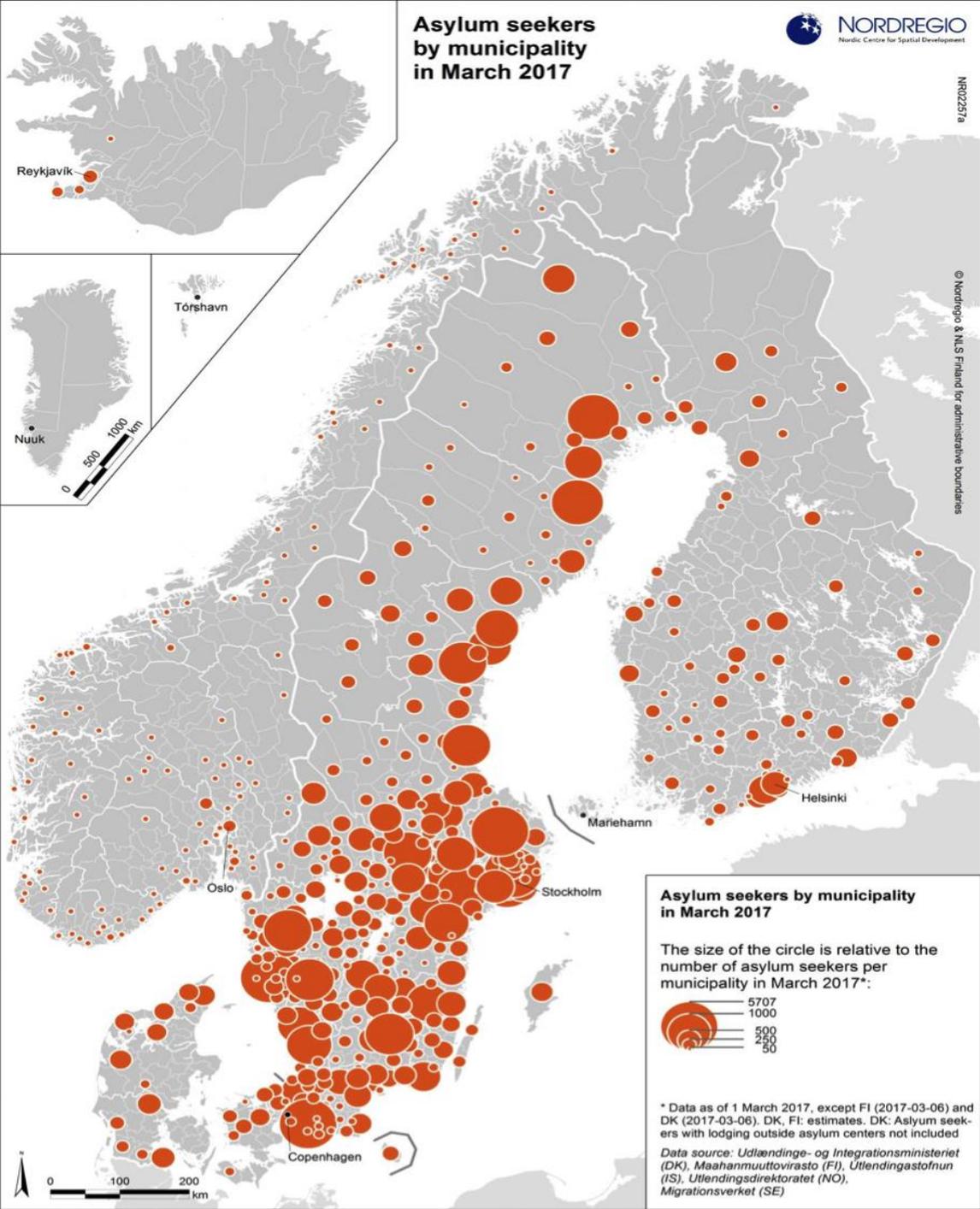
¹⁴ Lag (1994:137) om mottagande av asylsökande m.fl.

¹⁵ Lag (2016:38) om mottagande av vissa nyanlända invandrare för bosättning.

¹⁶ Lag (2019:1204) om ändring i lagen (1994:137) om mottagande av asylsökande m.fl.

there is a general housing crisis in Sweden: according to the National Board of Housing, Building and Planning (Boverket) 83 percent of Sweden’s municipalities reported a lack of housing in 2019, with a particular deficit in available rental apartments.¹⁷ This is a general problem across the country, but it also affects low income groups such as (newly-arrived) immigrants particularly hard.

Figure 1: Asylum seekers by municipality in March 2017



¹⁷ [Bostadsmarknadsenkäten 2020](#)

5.2. Stakeholder Perspectives on Integration

The housing situation in Sweden mainly affects municipalities. After the introduction of the Settlement Act of 2016, municipalities started receiving a much higher number of new arrivals (assigned by the state) and found themselves having to organise housing for a much greater number of people.

With the housing act, Uppsala suddenly received 600 new arrivals, overwhelming to arrange housing for (SE_Meso_Interview_No3).

Depending on the housing capacity of the municipalities, accommodation issues were more or less severe. While overcrowding of reception centres was the risk in 2015 and 2016, the number of new arrivals dropped in following years. However, asylum seekers who had meanwhile obtained a residence permit and gone through the Establishment Programme started searching for more permanent housing on the housing market.

I do not believe that society has even understood the extent of the problems that arise when all the people who have been in establishment with a specific grant end up in the street and without housing and financial support (SE_Meso_Interview_No2).

As mentioned above, there is a general housing crisis in Sweden. As many as 83 percent of municipalities in Sweden are experiencing housing shortages, which makes it even more difficult for lower-income populations or young people to enter the housing market. Thus, newcomers who may have additional barriers and may find it near to impossible to find housing. Navigating the Swedish housing market is a complex affair: 'It is complex with networking and searching for housing itself, signing up for a housing queue is not enough' (SE_Meso_Interview_No2). Language barriers, lack of an established network, and simple understanding of the housing market may make it exceptionally difficult to find permanent accommodation. In particular, unaccompanied minors who reach the age of adulthood find themselves with a sudden lack of support from the state, as expressed by two stakeholders: 'They end up in places offered/provided by the Migration board or other NGOs' (SE_Meso_Interview_No2); and 'Stadsmissionen in Stockholm (a humanitarian NGO working with the homeless) supported many of them with temporary hotel accommodation (SE_Meso_Interview_No6).

Moreover, the urban-rural divide is quite important when it comes to accommodation. The bigger cities such as Stockholm, Gothenburg and Malmö, are much more popular destinations for labour market demand: *In Stockholm, workforce shortages have been so severe that they have hired people that don't understand their job properly (SE_Meso_Interview_No.6).* They often lack affordable housing, while rural communities may be able to host newcomers but have little access to infrastructures or resources for establishment.

The uneven distribution of refugees in municipalities is a major problem. While there is a long waiting period for adequate Swedish classes and teachers in Stockholm, in Hälsingland, where the competition is much lower, people with immigrant backgrounds speak better Swedish and may have better qualifications to enter the labour market (SE_Meso_Interview_No6). However, most newcomers prefer living in the cities for integration purposes.

5.3. Experiences Among Newcomers

5.3.1. Urban and Rural Experiences in Housing

The structural organisation of housing for refugees is as significant as the housing crisis in the context of Swedish accommodation governance. The Settlement Act (2016:38) was introduced to organise accommodation for refugees ensuring geographic dispersion. However new amendments have been introduced which have come into force on 1 January 2020, imposing restrictions on EBO housing arrangements. Geographical division has built up over time where the majority of Swedes can be found in some municipalities and immigrants in others. Moreover, spatial segregation is also observed within a municipality where in certain neighbourhoods, the dominant groups are either natives of Sweden or refugees. Several participants express that their preference to live in urban or rural areas depends on the opportunities they might have in those areas. The respondents show a high level of flexibility regarding the place of residence, while prioritizing their employment. Moreover, they highlight the importance of having the place of their residence not far from the workplace. In response to a question about preference of place of residence in an urban or rural area, one of the Syrian participants replied in the following terms: 'I follow my job. If the job is somewhere I would live there. It does not matter for me whether it is a city or a village.' (Syrian man, Age group 27-50, No.36, Permanent residence permit)

A distinct relation between comfortable housing conditions and psychological well-being of migrants was observed in our interviews. Participants express that without proper housing, they cannot feel settled, while decent housing brings them a certain feeling of stability in life.

Living Experiences in Urban Areas

The responses of participants suggest that those who used to live in urban areas and had a high standard of living in the home country, find it more difficult to live in rural areas where basic services are insufficient and there are fewer opportunities. Several respondents express that although there are a lot of difficulties in big cities and in the capital, for example, the rent is very expensive, nevertheless they prefer to live in big cities. When asked why she preferred to live in the capital or big cities, a Syrian woman responded in this manner:

The reason is, I was living in Uppsala, Sweden's fourth-largest city, and then I moved to the capital. So it is difficult for me to move to a small place or town. I mean, I am used to living in big cities. (Syrian woman, Age group 27-50, No.2, Permanent residence permit)

When asked about a preferred place of residence considering the features and advantages, a Syrian respondent living in a neighbourhood surrounding a large city, replied in the following terms:

I would like to live in the capital city, because in Syria all my life I've been living in the capital. In the capital, you always find job opportunities and activities. (Syrian woman, Age group 27-50, No.8, Family reunification)

Several interviewees express that they prefer to live in urban areas especially in big cities because they feel life is easier there compared to rural areas. Besides they feel

that urban life provides them with more freedom of movement, as expressed by an Afghan asylum seeker:

I live in a big city today. I feel that life is easier in a big city, for example, public transport and I can get home at whatever time I want, compared to a smaller city, or worse than that of a village. You miss the opportunities you'd have in a big city. (Afghan man, Age group 18-26, No.48, Asylum seeker)

For another participant, it is not about big or small cities but rather urban areas and infrastructural benefits which provide more opportunities regarding education, jobs and so on. He states:

In my opinion, in a big or small city, I can't live in the countryside because I can't find a job. In the beginning, I lived in the countryside but there was no university. Population creates more jobs and more opportunities. (Syrian man, Age group 27-50, No.14, Temporary residence permit)

Several participants express that they are not only satisfied living in neighbourhoods in urban areas but also they plan to buy their own house in those areas in the future. A Syrian participant replied in response to a question about a preferred place of residence in Sweden:

I prefer to stay in the neighbourhood that I'm staying in right now because it's the best neighbourhood in Sweden so I don't have any intention to move. But maybe in the future I am thinking of buying a house in this neighbourhood too. (Syrian woman, Age group 27-50, No.5, Permanent residence permit)

Another Syrian woman replied when asked about her current place of residence in an urban area:

It's okay. I guess I'm happy. I aspire to have my own place... I mean a place of my own. I want to own a house. (Syrian woman, Age group 27-50, No.26, Family reunification)

Living Experiences in Rural Areas

Participants living in rural areas often point out the issue that accommodation in isolated rural areas creates additional pressure on their situation. Although they get support from municipalities, they have difficulties having their needs met, which results in helplessness and an inability to improve their situation. Access to easy transportation, education, job, socializing are some of the matters that the respondents feel deprived of living in rural areas. Some participants even call their living experience in remote rural areas 'detention'. However, some other respondents state that they prefer to live in rural areas.

While describing her living experience in a village, a Syrian woman said:

We can hardly get our needs met. We were living in a village, we didn't know how to move around. Only once a week one of the villagers used to pick up men and take them shopping to get their needs only. We couldn't go out, there was no transportation. (Syrian woman, Age group 27-50, No.33, Permanent residence permit)

Another Syrian man describes his struggle to attend school as his allocated residence is far away. He addresses his experience living on an island as 'suffering'. In his words:

Today I am distraught in Sweden. Because they put me on an island. 'NN Island' so if I want to go to school I need two hours to get there. That is why I don't go to school sometimes. [...] Yes, we all suffer. We live in a youth collective accommodation on the island. First, we go by bus and then by boat. Then we need two buses to get to school.

[...]

I have been on the island for almost a year, and I have not walked more than one kilometre... and I feel like I am in detention. (Syrian man, Age group 27-50, No.7, Temporary residence permit)

Another Afghan asylum seeker states that they are not being helped enough and the authorities are helping Syrian people more. She feels that Afghan people are discriminated against and they are provided housing far away in remote areas unlike Syrians. In response to a question regarding fulfilment of basic needs and discrimination, she replied in this manner:

No, not everything. They were helping Syrian people more; I feel that Afghani people didn't get so much attention... Yes, I think so. All the Syrians got apartments in cities but Afghani people are living further away and living like animals. (Afghan woman, Age group 27-50, No.58, Asylum seeker)

Experiencing discriminatory treatment may result in both physical and mental consequences such as anxiety, stress and depression. Another Afghan asylum seeker expressed his discriminatory experience in this manner:

Their high priority was the refugees from Syria, even healthy male refugees from Syria were taken well care of compared to an Afghan family. That made me feel very bad and discriminated against. (Afghan man, Age group 27-50, No.61, Permanent residence permit).

At the same time, some participants express that they prefer to live in rural areas, in isolation, because it can bring some solace to the sufferings they have experienced. A Syrian woman, when asked where she would prefer to live, replied in the following terms:

A rural area, and the reason is because I suffered a lot and I want to be alone in my work and my life and stay away from the problems and do not feel pain anymore. (Syrian woman, Age group 27-50, No.21, Permanent residence permit)

5.3.2. Perception of Neighbourhood, Sense of Belonging and Ghettoization

Several respondents express a sense of belonging¹⁸ about the neighbourhood they live in, while others express a lack of belonging. Some respondents express a certain level of disappointment about their neighbourhood, since it is mainly inhabited by immigrants, which hinders their opportunity to be engaged with broader society. They feel detached and distant from Swedish people and culture. On the other hand, other participants feel

¹⁸ See also the section on Citizenship, Belonging, and Civic Participation in this report.

comfortable being surrounded by people of their own community from their country of origin.

The participants who hold positive views of their neighbourhood often say that they feel safe there, people are nice to them and they have easy access to transportation, the market, education, a job and so on. A Syrian woman expresses her satisfaction with the neighbourhood as she feels that she is living in her own community surrounded by Arabs. In her words:

In Uppsala, the neighbourhood I'm staying in now is called 'xx', all of them are Arabs, my neighbours in the building are Arabs. I didn't feel that I'm away from Damascus. (Syrian woman, Age group 27-50, No.35, Permanent residence permit)

Living in a neighbourhood with a predominantly Swedish population can also provide a sense of belonging. Two other Syrian participants also express their positive sense of belonging to a community in the following terms:

I am very happy with the neighbourhood, which has many Swedes... There are many Assyrians, who are very kind. It is close to my church. It is also close to work. I feel at home here, and see this as my place for the future. (Assyrian woman from Syria, Age group 27-50, No.37, Permanent residence permit)

The area is a medium to small community, it's 'NN' and it's very good for families. Schools are nearby so there aren't any obstacles in terms of transportation. (Syrian man, Age group 27-50, No.20, Permanent residence permit)

The quotes above also highlight how living in a neighbourhood where one has a sense of proximity to other parts of daily life such as a workplace and schools. A sense of home can

also be connected to feeling safe, as this Afghan asylum seeker states about his neighbourhood:

I am living in a good neighbourhood, I greet my neighbours, and I feel safe when I walk around my neighbourhood, so there's no problems. (Afghan man, Age group 18-26, No.48, Asylum seeker)

While several respondents hold positive views, others express their struggles, dissatisfaction, and frustration with living in their neighbourhood. They feel that their neighbours do not want to communicate with them or try to avoid them. Others indicate that their poor Swedish language skills are the reason for their inability to communicate with their neighbours. A Syrian man says:

The social aspect is terrible because we do not have any relations with the neighbours. (Syrian man, Age group 27-50, No.27, Permanent residence permit)

Similarly, an Afghan woman while commenting on her neighbourhood stated:

I have little communication with the neighbours, I feel like I am living inside a cage, no choice in life. (Afghan woman, Age group 27-50, No.58, Asylum seeker)

Another Syrian man expressed his frustration linking it to the lack of community response to his attempt at interaction:

I have been living there for four and a half years now. As for the neighbourhood where I live, I do not feel anything about it and I do not have any contact with anyone and I do not care. The reason is that when I try to communicate with them, I feel

that they do not want to do so. (Syrian man, Age group 27-50, No.42, Permanent residence permit)

Although the municipalities try to ensure geographic dispersion of refugees, many neighbourhoods reflect the image of ghettoization of immigrants as expressed by the following Afghan participant while describing her living experience:

We are feeling like migrants, especially when the bus passes, we feel isolated. We know it's not where normal people are living. We feel we are separated from ordinary people. (Afghan woman, Age group 27-50, No.58, Asylum seeker)

Another Syrian participant while commenting on the barriers to integration into society had to say this about his living experience in his place of residence:

The problem is the distance between houses and schools is not studied well, because in some municipalities the reception of refugees is forced on them by the government and also sometimes felt that things are decided at random. They put the refugee in the countryside who has no language and no car, so you oblige him to spend his life on the road between school or work and home. I mean I did not take this into account, I mean I have to work eight hours and I need two hours to go and two hours to go back. (Syrian man, Age group 27-50, No.7, Temporary residence permit)

5.3.3. Experiences in the Housing Market

While some interviewees stay in rooms/apartments provided by municipalities and SMA, others stay with their friends and relatives. It is also not uncommon that interviewees rent apartments from the irregular market because of the housing crisis. Some live in student housing being students. Housing rent is often supported by municipalities, SMA and Social Office.

Insecurity in the permanence of the housing situation is another major concern among interviewees. When asked about current housing, one of the Syrian interviewees described his housing experience in the following terms:

I was living with my brother in law who had a home in Sweden for a very long time. I waited for more than two and a half years. I cannot find another solution for accommodation, because it's very difficult to find, and there are a lot of difficulties beginning with the high rental. I know many people who came with me, they are housed by the municipality because the law compels the municipalities to help and accommodate the newcomers. (Syrian man, Age group 27-50, No.27, Permanent residence permit)

A Syrian student shared that it was relatively easier to find a place to live as he was entitled to a student accommodation:

I found it because I am studying at the university and because of that I am capable of renting a student apartment, and I am paying the fee by myself and I have been living here for two years. (Syrian man, Age group 27-50, No.3, Permanent residence permit)

In response to a question about how she pays for her housing and whether it was difficult to find housing in the capital, a Syrian interviewee stated:

I pay it myself because I have a job. I don't receive any financial aid. It's all coming from my salary... I had to look around for sure but eventually I found it. In Stockholm, it's the hardest place to find a residence. (Syrian woman, Age group 27-50, No.12, Permanent residence permit)

Some interviewees point out that they were obliged to have recourse to the “black” market and pay a much higher rent because otherwise they could not find a place to live:

I get help paying the rent. I found it with the help of the rental companies and paid them a subscription until I got it. It is impossible to find a house on the 'white' rental market because there is a 'black and white rent,' as some people are renting the house secretly at high prices. The government should pursue this matter and put an end to it. (Syrian woman, Age group 50+, No.28, Permanent residence permit)

5.3.4. Congested Living Situations

Congested living situations create psychological pressure and tension among refugees. Often families share small apartments, staying 3/4 family members in one room. Single individuals also have to share rooms often in inadequate space. Whether family or single, in many of our interviews, participants complain about congested living conditions. When asked about her current residence, a Syrian woman compared her congested living situation with ‘prison’ and described how it impacted her children:

I am very unhappy because it is very cramped like a solitary prison. Although they cared about children, they did not take into consideration that my children were teenagers. They have become so depressed that we are all in one room. (Syrian woman, Age group 27-50, No.32, Permanent residence permit)

Another Syrian woman shared her experience of how the congested living situation ultimately affected their family relations:

Now I live in Stockholm and it's the best neighbourhood. But, it's one room where I stay with all my family. We are four people and my daughter is studying pharmacy and the child needs a room to study but we all live in the same room. We can't study or sleep and that affects our family relations. (Syrian woman, Age group 27-50, No.30, Permanent residence permit)

Instability and temporary housing contracts often create tremendous psychological pressure on the part of participants. The uncertainty about the current housing situation wondering when and where to be moved next, creates hindrances to critical activities in life - language learning, child care, access to education, job, the opportunity to be engaged in the broader community and ultimately integration into Swedish society. Several participants call this experience, ‘starting from zero’ as expressed in the following by a Syrian woman:

I want to have a place to live, not to move again and again. I am going to start from zero and I do not want to move after that to start all over again (Syrian woman, Age group 27-50, No.29, Permanent residence permit)

Instability of housing can sometimes become life threatening for some participants, who have serious healthcare needs and are attached to a current healthcare facility:

But the negative thing after getting a flat in 'xx' is that after five months my contract will end. What can I do as my rehabilitation period lasts for three years and I already have my doctor here and in this hospital they have a special department for this illness. Let's say I do not deserve to get this flat for four years, I am ok with that but at least I need them to understand that it is my right to complete my healthcare here. Should I look for the medicine itself or look for an apartment? [...] I did not find one. (Iraqi woman, Age group 27-50, No.46, Permanent residence permit)

When asked about the challenges that limit the process of integration into Swedish society, one of the Afghan participants with permanent residence permit responded in this manner:

One of the challenges that I have faced is having a permanent home, and being forced to move from time to time, which limits my integration with society. As at one place, after getting a relationship and communicating with people around, I had to move to a new place and start all over again. (Afghan man, Age group 27-50, No.61, Permanent residence permit)

Another Syrian single mother describes her vulnerable situation derived from the temporariness of her housing contract. She described her experience in the following terms:

I live in the capital itself. The house is good and it has everything. But the problem is the municipality. The contract was for two years and it is finished now. So, it is a problem. As you know if I need to work in Stockholm, I will face the housing problem. We have signed a contract for two years and we have to leave. They can sue me, but a single mom of two children, what can I do? Should I live in the street? (Syrian woman, Age group 27-50, No.29, Permanent residence permit)

5.4. Summary

As seen in Table 3, our interview material shows that of those who reported they could choose their place of residence in Sweden (n=33), the majority were men (58%) and of those who were satisfied with the region they are currently living in (n=37), the majority were men (65%).

Table 3. Housing, by frequency and percentage

Could/did chose their place of residence in the host country		
No	23	38%
Yes	33	54%
Not applicable/No response	5	8%
Satisfied with the region they are currently living in the host country		
No	17	28%
Yes	37	61%
Not applicable/No response	7	11%

The overall picture of housing experiences based on the interview material is somewhat diverse. The rural - urban dimension is clear, in that several interviewees express that they prefer to live in urban areas, larger cities in particular, because that is what they are used to from before, or because that is where they feel they have access to the best opportunities and social dimensions of life. Some experience problems in urban areas that have to do with segregation and living with other immigrants as neighbours, whereas others feel comfortable and at home for the same reason. In the rural areas, the main issues experienced are social isolation and lack of opportunities. Temporary contracts put an additional toll on the migrants in aggravating circumstances for single mothers and people with serious health conditions. The overall housing crisis in Sweden, with lack of affordable housing in most municipalities, is of course an issue for immigrants too. The situation forces them to have recourse to the "black" market and, thus, puts them at risk of fraud.

6. Psychosocial Health and the Role of Religion

Newcomers' health in general is noticeably connected with their socio-economic condition, including legal status, employment, housing, and future goals. This section deals with the psychosocial health conditions relevant for newcomers in Sweden, the healthcare system, access to healthcare, and distribution of information on healthcare at the macro level. For the meso-level, this report includes health services as experienced by providers, participation of non-state institutions, cultural, gender and contextual factors and limits and limitations. For the micro level, we include access to healthcare, informal health services, the role of religion or other meaning-systems, the role of family and significant others as experienced by the newcomers themselves.

6.1. Healthcare System

6.1.1. The Healthcare System's Current Situation and Challenges

The main responsible entity for the Swedish healthcare system is the county council (*Landsting/Region*). The Swedish healthcare system is not centrally governed and the county administrative bodies (*Länsstyrelserna*) and the municipalities (*Kommunerna*) share the responsibility for the different aspects of the healthcare system with the county councils. The governance of the Swedish healthcare system is mainly regulated by the Health and Medical Services Act (Sweden, 2020) as well as other regulations such as the Patient Act, the Patient Safety Act and the Patient Data Act (Region Stockholm, 2020). The main national healthcare organisations are the National Board of Health and Welfare (*Socialstyrelsen*) (NBHW), the Swedish Association of Local Authorities and Regions (SALAR) and the Health Responsibility Board (*Hälso-och sjukvårdens ansvarsmyndighet*) (Sweden, 2020) and the Public Health Authority of Sweden (*folkhälsomyndigheten*) (PHAS).

At the end of 2015, Sweden received a high number of asylum seekers not witnessed since the Second World War. As a result, the pressure was enormous on many central social functions, which were also subjected to great strains (Government Bill 2015/16:174, p.3). The healthcare system was one of them and the developments inside this sector after the refugee influx in 2015 were clearly explained in a report produced in 2016 by the NBHW (*Socialstyrelsen*). According to this report, the challenges that the healthcare system faced when it came to providing care to asylum seekers and newcomers were not new then. However, the extent of these challenges increased significantly, when a large number of asylum seekers came to Sweden during a short period of time (Socialstyrelsen 2015, p.7). This report clarifies that many of these challenges were common for the whole healthcare system in Sweden while some of them were specifically related to asylum seekers and newcomers' needs and situations. For example, the need for information, difficulties in communication, the lack of interpreters, lack of cultural understanding and competence, the special needs of unaccompanied minors and the need to meet the requirement of mental illness treatment were some of these. In addition, the displacement and housing of the asylum seekers and the long distance from the healthcare centres were big challenges for them. Reaching out to the newcomers, planning for the needs of their healthcare, and the need for preventive measures to promote good health development in the longer

term were also other relevant challenges for these groups. Another important challenge was related to the equality between and gender of the healthcare staff, which were not always adapted to the contact requirements of both genders in the above-mentioned groups (Socialstyrelsen 2015, pp.7-8).

6.1.2. Access to Healthcare for Newcomers

Sweden has a special act (*lag 2008:344 om hälso- och sjukvård åt asylsökande*) called the Act on Health and Emergency Care for Asylum Seekers that regulates the rights and access of the asylum seekers, beneficiaries of protection and certain other foreigners to the Swedish healthcare system. This act contains provisions about the region's obligations, in addition to what follows from the Health Care Act (2017: 30) and the Dental Care Act (1985: 125), to offer healthcare and dental care to asylum seekers, beneficiaries of protection and certain other foreigners. On the other hand, the extent of which emergency and healthcare can be provided for certain foreigners who reside in Sweden without necessary permission, is regulated in another act (2013:407) and its preparatory work (Government Bill 2012/13:109).

These two Acts make the distinction when it comes to emergency, healthcare, and dental care in Sweden between two main groups namely children under 18 years old and adults. All children and young persons under the age of 18 are offered access to the same healthcare system and dental care system as children who are registered at the tax authority as residents in Sweden. Healthcare is largely free of charge for children, but this can vary depending on where you live. Medicine for children is free if there is a prescription from a doctor (SMA 2020g). However, there is an exception to the rule that applies to children whose visit to Sweden is considered temporary (Socialstyrelsen 2019).

Asylum seekers are entitled to emergency care, dental care, and healthcare that cannot be postponed as well as a health examination as soon as possible after their asylum application unless it is clearly unnecessary. They are also entitled to childbirth care, abortion care, advice on contraception, maternity care and healthcare under the Swedish Communicable Diseases Act (SMA 2020g). Emergency and healthcare can be provided to them to a greater extent than required by law since it is up to each county council/region to decide which type of healthcare the asylum seeker can receive (Socialstyrelsen 2019).

According to the Act (2013:407) on emergency and healthcare for certain foreigners who reside in Sweden without necessary permission and its preparatory text (Government Bill. 2012/13:109, pp.39, 54), the undocumented migrants can be offered the following:

- Emergency care and treatment (immediate care)
- Care and treatment that is more than immediate care
- Care and treatment of illnesses and injuries where even a moderate delay can have serious consequences for the patient
- Care that can prevent a more serious medical condition
- Care to avoid more extensive care and treatment later
- Care to reduce the use of more resource-intensive emergency treatment measures
- Care that is the follow-up of care given (including psychiatric care)
- Maternal healthcare
- Contraceptive counselling

- Care for abortion
- Medicines covered by the Medicines Benefits Act
- Disease control action
- A health examination or assessment (if not already received by the individual)
- Aids in the case of special physical needs (unless the patient can access them in another way)
- Sick transport in connection with the occasion of care
- Interpreter in connection with the occasion of care

This care for the undocumented migrants includes all types of care: somatic and psychiatric healthcare and dental care (Socialstyrelsen 2019).

6.1.3. Critical Reflection on Access to Health Provision in Sweden

The implementation of the above-mentioned Acts was the subject of several critical reflections from the part of civil society actors such as the Swedish Red Cross. The Swedish Red Cross has been very much engaged in providing healthcare services through its healthcare agency (*vårdförmedling*) to migrants who fall outside the scope of the Swedish society's protection system. In 2018, the Swedish Red Cross produced a report (Röda Korset 2018) concerning the hindrances encountered by the undocumented migrants in accessing the healthcare services in Sweden, which can be summarised as follows:

1. The first observation explained how the ambiguity of the legislation led the healthcare staff to encounter confusion in assessing the term and concept of "healthcare which cannot wait" (*Vård som inte kan anstå*). In 2014, although the NBHW (*Socialstyrelsen*) was commissioned with the task of clarifying this concept, it reaffirmed the fact that it was not possible to have a list of diseases. Thus, Socialstyrelsen determined that it is up to the healthcare staff to assess each case, leading to much room for subjectivity for treatment.
2. The Swedish Red Cross's healthcare agency experienced lack of knowledge among the staff in the healthcare system about the Act (2013:407) on emergency and healthcare for certain foreigners who reside in Sweden without necessary permission.
3. It was noted that there was a fear of contacting the authority and lack of knowledge of confidentiality regulations from on the part of the above- mentioned groups of beneficiaries.
4. Undocumented migrants have difficulty in expressing and exercising their rights.
5. Administrative routines and lack of language skills could hinder the undocumented migrants from accessing the healthcare system.
6. Insecure life circumstances could limit the access of the undocumented migrants' children to the healthcare system.

Similar and other types of hindrances were also documented for the newly arrived children, both at organisational and communication levels. According to a report by the Ombudsman for Children in Sweden (2017), the health-related matters for newly arrived pupils in Sweden were located under the responsibility of the municipality. Before entering the school, they had been in contact with the healthcare system, which was under the responsibility of the county council. It was not always possible for the school nurses to track back the health record of newly arrived pupils who had moved

several times before settling down at the school. This meant that they might have had several health examinations and vaccinations, which could not always be easily traced back and therefore different illnesses would need to be examined again and the treatment could start from the beginning. In addition, the lack of communication and non-transfer of the health records of the newly arrived children in the municipality and county council levels led to negative consequences. Some newly arrived children got the vaccinations and health examinations several times, while others did not get any (Ombudsman 2017, p. 23).

6.2. Healthcare Information and Distribution

6.2.1. Challenges in Distribution of Information and in Provision of Healthcare

The SMA plays the central role in the distribution of information on the Swedish asylum system, its different functions, supportive agencies, asylum seekers' duties, rights and entitlements including their access to the healthcare system. This is usually done through different channels. The Swedish Red Cross is one of the main civil society actors, which provides the undocumented migrants and unaccompanied minors not only with information concerning their possibilities and accessibility to the healthcare system. It also provides the undocumented migrants and other migrants, who fall outside society's protection system, with certain healthcare services, when they do not have access to the governmental healthcare system. The Swedish Red Cross's reception centres provide healthcare counselling where the undocumented migrants can call and get the right information (Röda Korset 2020). Another important channel for information on the healthcare system in Sweden has been the healthcare informers (*Hälsokommunikatörer*) who are defined as a career group recruited by the regional county council who can contribute to better public health services and more effective healthcare activities for the newcomers and asylum seekers. The healthcare informer is a person with a foreign background and has an education within the health and emergency care system (Vårdgivarguiden 2018).

There can be certain hindrances associated with provision of healthcare services to migrants. Each region in Sweden has the responsibility to organise its healthcare programmes for asylum seekers. On the one hand this is needed as each region has its own contextual concerns and processes. Also, the healthcare needs of asylum seekers and other groups differs as to numbers of such populations as well as the overall way both somatic and mental health services are organised. On the other hand, same or similar services and resources across regions cannot be assumed.

It is clear that the system is set up to allow for the necessary flexibility each region needs. The intentions and goals for healthcare services for migrants with refugee backgrounds are very good in each region. However, different challenges mean that a uniform system across the regions does not exist. This can be related to availability and training of interpreters in the healthcare settings, whether the services of the trained group of healthcare communicators are available or the type of mental health services available, etc. (SE_Meso_Interview_No14)

A dentist in a public dental care in Stockholm, describes the examination given to newly arrived children:

They get the same treatment as all other children even when they have not received their residency. There is no difference between them and other children. So we do examinations and treat when needed. If they are under 18 i.e. (SE_Meso_Interview_No16)

Problems due to the lack of interpreters, as described by the same dentist as above:

There are not enough interpreters, so it is a problem. Fortunately, for us we have a dentist who speaks Dari and Farsi and she helps us a lot but it is not fair to her since she is not an interpreter. (SE_Meso_Interview_No16)

Other problems with interpretation are maintaining confidentiality among smaller communities, as they may know each other, or the lack of understanding:

(You) cannot know what is being communicated because one does not know what the translator is saying and everyone is nodding. (SE_Meso_Interview_No15)

Language has been in most of the cases a hindrance in communication and access to the healthcare services, as all the above-mentioned reports have indicated. The interviewed nurse in the healthcare asylum reception centre in Boden confirmed this fact and the importance of the interpreter's role. Although good knowledge of English prevails in Sweden, there is still no guarantee that English could help.

We employ interpreters. We always use interpreters if the patient doesn't speak Swedish. Even if they say that they speak English, there's a possibility that I won't understand something in that language so we always use interpreters. Afterwards we do some sampling, and if there's something wrong with it, we summon the concerned person back again. (SE_Meso_Interview_No4)

The housing shortage and the large number of asylum seekers coming to Sweden during a short period in 2015 led to many asylum seekers and migrants having to move from one place to another. As previously mentioned this eventually led to some of them missing their healthcare check or examination and vaccinations because of the lack of ability to trace back their healthcare record while they were moving. The interviewed nurse in the healthcare asylum reception centre in the town of Boden was aware of the possibility that some asylum seekers, who moved from another city, might have missed their healthcare assessment. When asked about which groups of migrants the nurse works with, the respondent confirms the noted finding in the Ombudsman report.

All of them. We receive papers from the Swedish Migration Agency for all asylum seekers, which we then summon for a health interview. This way the information on how we operate spreads and more people come, and if we see that they haven't booked a health interview or that they haven't done it in another city, then we call them in. Either they come directly to us or we summon them here. (SE_Meso_Interview_No4)

Those with special physical needs among newly arrived are a special challenge. As another stakeholder described it (SE_Meso_Interview_No12), the challenges, as identified by the counties, are related to the lack of information, to being well-prepared, and the need for special medical treatment that is not always available.

6.2.2. Participation of Non-state Organizations in the Implementation of Healthcare

Based on our interviews, we see that churches of different denominations in Sweden have focused their support on newly arrived migrants, without differentiation of religious belonging, mainly around needs of housing, finding work, social activities, and general societal information for an effective integration. Religious and ethnic organisations among migrants have an advantage in counselling newcomers, as their members have prior migration experience and are thus able to support the newcomers linguistically as well as with social and practical issues in life in general (SE_Meso_Interview_No17). Our interviews have also shown that in some congregations the newcomers have affected the demographic situation to such an extent that the language in the sermon has been adopted to meet the needs of the newcomers, while in others the effect has been limited (SE_Meso_Interview_No17). One specific area has also been “pastoral care and baptism for those who are asking for this,” for example, in cases of conversion (SE_Meso_Interview_No13).

One motivating factor in helping newly arrived migrants is linked to “faith and worldview”, as a representative of a religious congregation explains it, where this is linked to how one wants to participate in society to make a difference and in finding a meaning in life (SE_Meso_Interview_No13). Though the religious congregations do not work specifically with health services, as these are provided by the state, some do plan for services for elderly people in general. The churches are well aware of the political regulations having an effect for those applying for residence permits and follow these very closely. They also maintain good relations and contacts with state institutions.

6.2.3. Cultural, Gender, and Contextual Approach to Healthcare

Several misconceptions and culturally rooted expectations were discovered in the interaction of both healthcare professionals and newcomers. Swedish healthcare specialists perceive that the patients tend to bring their cultural narratives and meanings in relation to gender and status, which interfere in their trust in differently organised services in Sweden. It can also be said that their religious beliefs and practices play a great role both in their attitude towards somatic healthcare and their mental state.

Such misconceptions, and cultural misinterpretations and the challenges in communication and healthcare practice signal a need for further knowledge for healthcare professionals and a more efficient means of access to cultural knowledge. For healthcare professionals, the use of internationally-validated instruments such as the *Cultural Formulation Interview* (American Psychiatric Association 2013), could assist with resolving many of the confusions, misconceptions and misunderstandings in the communication between patients and healthcare professionals.

The problems in communication can be reduced with instruments such as the Cultural Formulation Interview. This short instrument of 16 questions gives a very good overview of the person’s own understanding of his/her problems, expectations from the healthcare system, resources, support system, etc. The problem is that such available instruments are not often used. When used, both treatment planning and patient satisfaction are improved. Access to training in this and other methods is not available nationwide in Sweden. Training and knowledge

centres for health professionals, such as ours in the Stockholm region, are in short supply. (SE_Meso_Interview_No14)

A senior nurse in a children's surgical ward of a regional specialist hospital, who meets many patients of migrant background, referred to her either via primary healthcare centres or via the Migration Agency, mentions some of the main problems:

The main problems are communication, but also health problems, including under-nourishment, which sometimes is due to an underlying problem. [...] Migrant kids often have a different set of diseases because of malnourishment, but also because they have come from places without working healthcare systems and therefore conditions are not picked up at the right point. (SE_Meso_Interview_No15)

The cultural differences may link to perceptions of authority, as expressed here:

Migrant patients need more time above all else – explanations and translation – but also sometimes they don't take me seriously because I am a woman and I am only a nurse. If the doctor doesn't say it, then it isn't true or important. (SE_Meso_Interview_No15)

There are many aspects in the differences between the culture of the newly arrived migrants and the culture practiced by health care providers; particularly concerning the function and role of the healthcare system and the expectations of the patients. The interviewed nurse in the healthcare asylum reception centre in Boden explained these differences in details as follows:

In Sweden, we usually try to take care of our bodies ourselves. We understand that I must do this and that by myself to see if there's something wrong. Many times I inform people who come here of what they must first do themselves at home. This is something that Swedes already know as a rule of thumb but I've noticed that people from other countries tend to depend more on the healthcare system than on their own assessment of the situation. This is because they usually haven't received the basic information needed in order to take care of their bodies and understand their symptoms, so that they know when it's necessary to seek further help. [...] Dozens of people, for example, come here saying that their skin itches. There aren't many Swedes that would go to the doctor because their skin itches, because we know that when the air in the house is very dry, our eyes water, our lips crack and our skin itches. (SE_Meso_Interview_No 4)

The interviewed nurse in the healthcare asylum reception centre in Boden explained also how exercising power and prescribing medicine by the physician can be perceived as an indication of social status or professionalism which does not exist in Sweden in the same way. She described her experience in interacting with asylum seekers and migrants with refugee backgrounds as follows:

My impression is that medicine means status. I myself have lived in Central America for half a year and I have 100% experienced that medicine means status. The concept of taking personal action and taking care of one's own body doesn't exist that much. Instead, the doctor must decide whether a person is sick or not and the person has no responsibility over that. In Sweden, we take that responsibility seriously. We don't make ourselves 200 crowns poorer because we have dry lips or a sore throat – we don't think that we're sick because of that. (SE_Meso_Interview_No4)

In another interview in the refugee medicine centre (Flyktingmedicin) in Boden, another nurse explained how she had experienced the impact of religiosity and the type of family and social life of the newly arrived migrants in their resilience.

I can think that if an individual is religious and prays, it can be very beneficial to their well-being – it helps them relax and focus their minds on something other than the trauma. Some groups also have a certain degree of mutual familiarity and help each other through difficult times. We often say that Sweden is a society of individuals, but this isn't the case for other countries – they have a much stronger degree of familiarity and work with one another. (SE_Meso_Interview_No9)

She also explained from her experience working with newly arrived migrants how knowledge about their religious background and religiosity was relevant to the quality of the healthcare services:

Religiosity can for example affect whether a person wants to receive blood donations or not, how they want to be buried and so on – it's not a pleasant topic of discussion but it's important nonetheless. This discussion is also an efficient way of letting them know that they can follow whatever religion they want in Sweden. Some of them experience problems in the housing areas if they are, for example, Christian and they come from a country with a Muslim majority. (SE_Meso_Interview_No9)

6.3. Experience of Healthcare Among Newcomers

In Sweden, 20-30 percent of asylum seekers suffer from mental ill-health, including PTSD (post-traumatic stress disorder), depression and anxiety (Migrationsinfo.se 2019, referring to Socialstyrelsen 2015). Another report from 2016, by the Red Cross, points at a third of refugees from Syria suffering from anxiety and/or depression and 30 percent from PTSD symptoms (Migrationsinfo.se 2019). Studies have also shown gender differences, women valuing their health more negatively than men and responding higher on PTSD and lower on resilience (Cetrez, DeMarinis, Sundvall, Fernandez, Borisova & Titelman, coming publication). Another health study (Sundell Lecerof 2008) showed that 23 percent of newly arrived Iraqis in Sweden (during 2007-2008) reported long-term illness, trouble, or disability. Mental health is also linked to factors such as education (WHO 2019, Hahn & Truman 2015) and to housing conditions (Cheung Chung et al. 2018). Factors that may hinder integration and increase ill-health among newly arrived are linked to discrimination, detention, dispersal, destitution, delayed decisions, denial of the right to work, denial of healthcare (The seven D's) (McKenzie, Tuck & Agic 2014). Awareness and knowledge of the effect of these factors is important for positive integration in society.

6.3.1. General Health Condition

The general health condition (both mental and somatic) of immigrants depends notably on their legal status, their experience in the home country, transit experience, experience (in the labour market, education, housing and the community) in the host country according to the patterns we have observed throughout this material. Notably the participants' mental health is remarkably connected with their legal status as it defines their access to different opportunities and services including the health service. Among the respondents, expressions of depression and feelings of pessimism post-

arrival are found, which are not only related to the situation in Sweden, but also being an accumulation from experiences in the country of origin and transit, as expressed here by an Afghan asylum seeker and a Syrian refugee with a permanent residence permit:

I am not feeling very good because when I was in Pakistan, the police took me and for 24 hours I was somewhere, I was tortured and I was raped. Still now I have problems, I had an operation a few times, in Pakistan and here two times, but still the doctor says I may need more operations. I am very, very disappointed. I feel like I cannot go back to Afghanistan. And my children, what's going to happen with them if we are not allowed to stay here. I don't know what to do. I'm totally confused. (Afghan man, Age group 27-50, No.50, Asylum seeker)

There are degrees of depression, and until now we live in depression. There are accumulations from the country of origin and due to lack of work and the general atmosphere. (Syrian man, Age group 27-50, No.9, Permanent residence permit)

The uncertainty and instability people experience in terms of labour, housing, inability to help the family, and start from “zero”, both among men and women, adds to the psychological stress. Different individuals express the psychosocial consequences in different ways, such as loneliness, sleeplessness, divorce, fear for the future, exhaustion, pessimism and depression, among others.

The uncertainty of legal status among Afghan participants, results in despair, fear and hopelessness, not only individually, but also affecting a whole family. An Afghan woman in the deportation stage describes this very clearly:

(Respondent is crying) I feel that I am inside a hole. I feel that I am trying to get up and everyone is watching but no one cares or helps me. I just want to go and tell them what is right, they've made their decisions based on wrong answers and wrong questions, but no one is listening to us and no one cares. I am so disappointed and I'm scared, I don't know what to do. I don't see hope. My daughters are deciding to study, and they're doing their best. They have hope. (Afghan woman, Age group 27-50, No.52, Asylum seeker in deportation stage)

Individuals in the deportation stage are affected strongly, as expressed by two different women:

I cry very quietly so no one will hear me. I don't want my children or my husband to know that I am crying. I have a lot of pain. Some of my neighbours have told me that after four rejections the police will come and deport you back to Afghanistan. I am very scared now because it's been two days since we received it. We are waiting, it can happen to us. (Afghan woman, Age group 27-50, No.52, Asylum seeker in deportation stage)

Yes, I had depression and I am not feeling good. Of course it is very normal when you have this kind of situation in your life, so you do not feel good. My sister has contact with a psychologist, my father too, the whole family we are not feeling good. We are very upset and depressed because of the situation. (Afghan woman, Age group 18-26, No.55, Asylum seeker in deportation stage)

Individual well-being is also related to the surrounding social context, to separation from other people, or where other people are in the same situation may have a negative effect. Though participants express that their own life has been affected negatively, they

see that the life of their children has become better. Children are described as a positive influence (more in the section on coping).

Even the larger ecological context, such as climate and nature, is referred to as a challenge, such as fatigue and lack of vitamin D during the dark winter periods and the opposite with light nights in summer resulting in difficulties to sleep.

6.3.2. Experience and Access to Regular Health Services

Access to Healthcare

Several respondents express that the access to healthcare in cases of emergency is prompt and efficient. Dialling a special health service number has sometimes proven to be a life-saving option for participants, as reflected in the following statements of Syrian refugees with permanent residence permits:

Once, my wife had a gallbladder attack and we called the ambulance and they did cholecystectomy surgery. The ambulance came in 15 minutes and they did their duty. (Syrian man, Age group 50+, No.19, Permanent residence permit)

My daughter got sick and we dialled 112. And straight away they understood the situation and they informed the hospital. (Syrian man, Age group 27-50, No.20, Permanent residence permit)

Access to healthcare seems unproblematic for most participants, where one can easily book appointments, service being available in proper time, and the costs are affordable. Even more costly care, such as teeth, is doable, as there are economic subventions. The care provided for children is evaluated positively by some parents, as expressed here by a Syrian woman with a permanent residence permit:

In Sweden the doctors are so nice and keep an eye on my daughter's status and whatever she needs. It's positive and it means a lot to me... When I was living in the UAE, there wasn't much attention or healthcare. But here things that have been done to my daughter are really amazing, no effort has been saved, which shocked me the most. (Syrian woman, Age group 27-50, No.33, Permanent residence permit)

Several women confirmed easy access to health services, however, when it comes to mental health counselling, they avoided that, mainly for reasons of confidence or lack of trust towards strangers. Others avoid psychiatric counselling, fearing they will lose custody of their children, as expressed by an Afghan asylum seeker: "As I am not feeling well, I'm scared they will take my children from me" (Afghan woman, Age group 27-50, No.58, Asylum seeker).

However, some participants express mixed feelings towards regular health services. Despite having good experiences, with professional service, they also feel that the care is not sufficient, they have to ask for additional support, or they have to be in a critical situation in order to be taken seriously, all these having health risk consequences. Others express the frustration of not being able to meet with a doctor or a specialist, or the time to get a diagnosis is very long, resulting in a deteriorating health condition.

Legal status plays an important role in access to health services. Afghan asylum seekers who have received a rejection were denied healthcare. Uncertainty in legal

status, such as a case related to the Dublin regulation caused a serious delay for an Afghan asylum-seeking woman diagnosed with cancer, posing significant challenges in access to medical care:

They told us to go back to Hungary, because we had given our fingerprints over there. That I and my son were sick wasn't acceptable for them to keep us here. They told us that there are doctors everywhere (Afghan woman, Age group 27-50, No.53, Asylum seeker)

Individuals who turn 18 and get rejections find themselves in a difficult situation, being cut off from health services, especially difficult for those in need of psychological counselling.

Language and Discrimination

Despite the positive and easy access to healthcare, language is raised as a problem. There are problems with interpretation, shortage of interpreters, lack of expertise among interpreters, or problems in identifying the language or dialect when booking an interpreter prior to a counselling, resulting in delays or having an interpreter not able to translate. Language barriers have also been a reason for not continuing psychological counselling, as expressed by a Syrian woman with a permanent residence permit:

I started to see a psychologist. She just listened to me because I was alone and I needed someone who could listen to me. Honestly, it didn't make me feel so good so I just attended three sessions. Mainly the language barrier was the problem and I had many things to tell, but I didn't know how to put it in words. (Syrian woman, Age group 27-50, No.12, Permanent residence permit)

Among the issues linked to perceived discrimination, are lack of compassion by caregivers, feelings of not being trusted, not given medicine needed, or being denied necessary care. An Afghan asylum seeker experienced discrimination in the delay of care she expected for her child. She was told that the child had been invited for an operation, but had missed the appointment it was too late to give sufficient care:

When we were seen, they told us that if we had come two, three years before, they could have helped him (the child), but now the problem was over. It was too late. They said we could take bits from his other hand or leg, but they said the risk was that the leg or foot wouldn't work well either. (Afghan woman, Age group 27-50, No.53, Asylum seeker)

The perceived discrimination is also linked to the rejection received. An Afghan woman in the deportation stage describes how this is common for several others who have received rejection, but attend studies:

I am not the only person feeling this way, very sad and depressed. In my class there are a lot of girls and boys that have the same problems, they received rejections. We have been to the psychologist but they don't have one in school. They didn't care about us and they didn't help us. (Afghan woman, Age group 18-26, No.57, Asylum seeker in the deportation stage)

6.3.3. Experiences of Meaning-Making Systems

We investigated whether participants expressed any meaning-making systems, specific or broad, constructive or destructive, before or after migration, as well as in

transition. These include religion, children, sports, socializing, freedom to travel, success, among others.

Religion is a broad meaning-making system, frequently mentioned by the participants. When positive, religion provides values, explanation for migration itself, protection, guidance, as well as hope and strength to cope with life in the new country. Inherent in religion and with an omnipresent image of God is also the psychological and emotional support people feel. In a life situation where the family is scattered and with difficult experiences, belief in a helpful God becomes even stronger:

The difficulties that I had in my life in the past were very severe. A lot of things happened to my family, to my father, brother and my mom, things that happened to me. But still I have hope that God will always be with me, if I am always thinking positively. And now it's much better and there is a God. (Afghan man, Age group 27-50, No.50, Asylum seeker)

Places for religious practices, such as a church, become an opportunity to meet with Swedes, as expressed by a Syrian participant with temporary protection status: "Every Sunday we go to church to meet people. I am open-minded. In less than two weeks I made good friends with my neighbours" (Syrian woman, Age group 27-50, No.10, Temporary residence permit). Others go to church for the social activities so their children can participate, but not committing to the faith itself. Yet others describe religion in Sweden within a secular societal context, where they find a freedom of religiosity, provided that one is not extremist.

However, in the face of the current situation, mainly due to the uncertainty of their legal status, some participants feel despair and hopelessness and lose what was meaning-making for them earlier in life. An Afghan woman in the deportation stage expresses this in the following way:

(Respondent is crying) In Iran, my children were the meaning of my life. I was hoping they'd go to school, become educated and live good lives. I was living and trying my best. I was working, helping my husband. Both of us were working day and night to support our children, make money and send them to school. Right now, I feel hopeless, I can't do anything. I can't speak Swedish. I can't decide anything. We are not allowed to stay in this country, and I feel hopeless. Life doesn't have any meaning for me. (Afghan woman, Age group 27-50, No.56, Asylum seeker in deportation stage)

If not a negative source, a faith in God also hinders some individuals to seek psychological support elsewhere, such as through therapy. However, religion can also be a source of direct negative outcomes, resulting in self-destructive behaviour, flight from reality, and apathy.

Some individuals feel the lack of religious places where they can pass on their practices to their children. In their view, society is not providing possibilities for religious practices equally to all citizens. Others dislike the political dimension of religion, which they see as distorting their life and values. They are critical to the extremist dimension of religion, as some individuals use religious practices for negative purposes, for economic interests, or a harmful ideology for society.

Children seem to be the strongest meaning-giving system for many participants, being a source of happiness, giving motivation, hope, goals in life, pride, and optimism, not

only in Sweden, but also before migration. Some adults focus solely on their children's future, as expressed by a Syrian respondent with a permanent residence permit: "I have prioritised my children and left the country for them" (Syrian man, Age group 27-50, No.42, Permanent residence permit). Another Afghan asylum seeker expresses the importance of children as follows:

Sometimes I feel very depressed, but when I see my children, especially my daughter, when she is running to me and calling my name, I feel so much better. The only problem I feel is when I think about the rejections, but I'm not a sad or depressed person. (Afghan man, Age group 18-26, No.51, Asylum seeker)

Another person, a young Syrian man with a permanent residence permit, expresses the role of children for his meaning system in the following way: "My children, because everything I do, my work, is for them, to make their lives better and easier." (Syrian man, Age group 27-50, No.27, Permanent residence permit). However, some people also forget about themselves and their own life doesn't carry any meaning: "I don't care about myself. My wife and me, our life doesn't mean anything" (Afghan man, Age group 27-50, No.50, Asylum seeker)

Family, including spouse, partner, or children (as described above), is also an important meaning system, giving purpose, support, motivation, optimism, and care. Family gives individuals motivation in life, whether it is by helping family members or taking on responsibility. Family is described as a coping mechanism for some, helping the individual to forget about the past, stop missing, and adjusting to the new country, as expressed by a Syrian woman who came to Sweden through family reunification: "My husband, my children, and my siblings, lift my spirit, when they say that the future is better here" (Syrian woman, Age group 27-50, No.8, Family reunification)

While migration has brought individuals in the family closer to each other, in a few instances the family can also be a source of burden or worry, if they are not present. Others feel expectations as demanding, not the least economic, by those left behind. Not having contact with the family is very difficult, resulting in isolation or invoking guilt, if one loses a member and is not able to visit:

After my father's death, I became a different person, very tense and isolated. I sit alone at home sometimes. Due to the fact that he died while we are far away, and my mum is alone now. (Syrian man, Age group 27-50, No.20, Permanent residence permit)

Individuals even put their lives in danger, as in the case of a Syrian man blaming himself as he wasn't able to help his family members get a residence permit in Sweden and had to leave them in Syria, as described by his wife who has received temporary protection status:

My husband told me that he's suffering a lot psychologically and that it is due to the journey. His mother got very sick and maybe not able to see her son again. They told him he's hindering the application of his family. If they decide to deport Syrians, they will deport our family as well. They made him feel guilty about us, so he made his decision, despite his psychological condition. He took sleeping pills and one time we had to call an emergency for help. He tried to poison himself. He attempted suicide. And I was so afraid to lose my husband, so I told him if he wanted he could leave to see his mother. (Syrian woman, Age group 27-50, No.10, Temporary residence permit)

The role of family before and after migration can be different, due to the change in family dynamics. Relations to significant others can become problematic, as family roles change and children want to choose their relationships independently of values in the family. But on the contrary, family relations can also change for the positive, becoming less controlling in Sweden. One Afghan woman in the deportation stage expresses the problematic relations in the family, before and after migration, as follows:

It has changed a lot, positively and negatively. Positive is that we are supporting each other. When we are sad we are talking to each other, telling each other everything, helping each other. But nobody has patience. When we talk about something, we fight with each other, talk very loud and scream at each other. We don't have patience anymore, because of the situation that we are living in. (Afghan woman, Age group 18-26, No.55, Asylum seeker in deportation stage)

Yet for others, religious faith and family together form a meaningful system. Faith is seen as an inspirational source while family is the most essential component to keep going forward in life in the host country, as described by a Syrian man with a permanent residence permit:

First, the inspiration for me is my religious faith, and I do not see it contradicting with anything else. This is important in my opinion because I see it as a cultural and social aspect of importance. But the family is the most essential thing in life. (Syrian man, Age group 27-50, No.9, Permanent residence permit)

The new life in Sweden becomes also a source for courage to free oneself, as a woman with a permanent residence permit describes it:

I was supposed to stay with him (husband) for the rest of my life just to please my parents and community. But, it's different here. I got rid of this thing... Although, it wasn't easy... It took me much bravery to rebel against my customs, not accepting being treated with injustice. (Syrian woman, Age group 27-50, No.33, Permanent residence permit)

But, these activities not only have a positive influence. This is the case with religion, towards which participants express ambivalence. Part of this ambivalence is due to the negative understanding of religion in general in Swedish society.

Friends are another group who are found as supportive and helpful in a practical and emotional sense in the new life in Sweden. An Afghan asylum seeker states that:

I had a very good friend, we lived for a year and a half in the same apartment. He was the best person in my life. He was supporting me all the time. (Afghan man, Age group 18-26, No.48, Asylum seeker)

Self-fulfilment, in terms of goals in life, respect, pride, and gender equality, is also mentioned linked to meaning. A Syrian participant with a permanent residence permit expresses that:

I faced a very hard situation and despite all of that I successfully proved myself and stood on my feet with my work, independence, and language. (Syrian woman, Age group 27-50, No.12, Permanent residence permit)

Associations, such as ethnic clubs, bring people close to each other and offer cultural activities that are meaningful, thus hindering negative outcomes such as depression and even suicide.

Work is an important dimension in life, giving meaning (see earlier section on labour) and being linked to participants' self-image, such as being ambitious and successful, as expressed here by a Syrian man who came through family reunification:

We have a quote about wisdom I like so much and depend on, 'work for your life as if you live forever and work for your afterlife as if you die tomorrow.' Something that gives me motivation is work and success and diligence, meaning my ambition.
(Syrian man, Age group 18-26, No.22, Family reunification)

The above inclusion of meaning in the micro level interviews is the attempt to name and locate the sources and resources that the participants are using to help them through challenges and changes. Meaning-making is a wide field of research in mental health, and not least with refugees and other vulnerable groups in periods of transitions (Silove 2013; DeMarinis 2014). Meaning-making has many dimensions. The existential dimension, one of Silove's life systems, plays a critical role in individual and group mental health as it provides particular kinds of information to which access is needed to deal with challenges and crisis situations as well as to promote wellbeing (DeMarinis 2014). The existential meaning dimension is focused on the individual's understanding of her/his own existence and the way meaning is created. This dimension includes worldview conception, life approach, decision-making structure, way of relating, and way of understanding. It also includes the activities or expressions of symbolic significance, such as rituals and other ways of making meaning. As each individual has an existential dimension and spiritual nature, the varieties of their expression include many different kinds of meaning systems. As seen through the empirical material above, people's expressions of meaning can be associated with traditional religious systems or with other existential meaning-making systems. For the individual it is also possible to have elements of different systems combined (DeMarinis 2003, pp. 44-45). Access to and enabling of existential meaning resources is considered a vital part of public mental health promotion for all vulnerable groups (Kalra 2012; Silove 2013; DeMarinis 2014; DeMarinis & MacMillan 2019).

6.3.4. Experience of Family and Significant Others and Roles

Family and significant others and roles in pre-migration: Several participants have experienced a significant influence of family in their lives in the home country but it has changed in Sweden, for some participants to a degree that none/nothing affects them anymore. A Syrian woman with a permanent residence expresses her situation in this way:

I don't know how to explain it. For example, this is my family, honestly, my family and my religion used to affect me a lot, a lot. But now, no one, nothing affects me.
(Syrian woman, Age group 27-50, No.33, Permanent residence permit)

Family and significant others and roles in transit: In transit, significant others, family, relatives, or new acquaintances, become important, as they support each other. Even in difficult situations, when being stopped in their attempt to cross country borders, facing accidents, or being deported, they help each other, as described here by a Syrian man, on their way from Turkey to Greece:

There was no problem, because we were a group that knew each other. Friends, acquaintances, and relatives. We left Syria together, and from the beginning the

atmosphere was positive, so we could support each other. (Syrian man, Age group 27-50, No.27, Permanent residence permit)

Family and significant others and roles in current situation: Several participants express that the migration journey, experiences in the new society as a family and friends, actually have contributed to make them come closer and depend more on each other as in the case of the following Syrian man with a permanent residence permit:

This situation made me really close to my wife, my children, and (a specific person by name). Because I have just them... So, the situation forced us to be closer. (Syrian man, Age group 27-50, No.15, Permanent residence permit)

Relations to significant others can become problematic or negative due to different reasons, such as new family roles, responsibility, change in cultural values and practices. A young Syrian man with a permanent residence permit describes the responsibility for the mother as a burden, affecting him negatively:

My mother affects me negatively. Whenever I talk to her I get so sad because she wants to see me and I can't go back. She can't see me anymore and at the same time I am helping her financially from Sweden. (Syrian man, Age group 27-50, No.27, Permanent residence permit)

Some respondents feel that family and significant others can have a positive or a negative impact on life depending on the situation, while others feel the notion of family being a positive or negative source depending on whether they are able to help them in the time of need. Besides, certain expectations by the family can for some participants create a remarkable pressure, impacting their lives in the host society.

6.4. Summary

As seen in Table 4, our interview material shows among the respondents a majority (n=47, 77%) reported they have received basic healthcare, with limited gender difference. Counselling received by healthcare providers was reported by 25 participants (41%), of which the majority were men (56%). A majority of the respondents (n=41, 67%) have experienced a very difficult situation (e.g. serious accident, natural catastrophe, rape, war, abuse, or torture), with limited gender difference. A similar number (n=42, 69%) expressed psychological ill-health, more so among women (55%). Fewer persons expressed physical ill-health (n=15, 25%), with limited gender difference. Interestingly, the ability for resilience or coping (such as adapting, handling, bouncing back, having resources, or similar) after illness or hardship) was reported by the majority (n=55, 90%), of which the majority being men (55%).

Table 4. Health, by frequency and percentage

Basic healthcare received		
No	4	7%
Yes	47	77%
Not applicable/No response	10	16%
Healthcare counselling received		

No	8	13%
Yes	25	41%
Not applicable/No response	28	46%
Experienced a very difficult situation, e.g. serious accident, natural catastrophe, rape, war, abuse, torture (pre- or post-migration)		
No	19	31%
Yes	42	69%
Expresses psychological ill-health in current situation		
No	37	60%
Yes	15	25%
Not applicable/No response	9	15%
Expresses ability for resilience or coping (such as adapt, handle, bounce back, having resources, or similar after illness or hardship)		
No	5	8%
Yes	55	90%
Not applicable/No response	1	2%

Summing up the interview materials, this section mirrors that there is no uniform system of provision of healthcare services in Sweden for immigrants, which allows the regions to shape their own healthcare strategies and goals, resulting in diverse experiences. One of the hindrances in healthcare service for refugees is the communication gap mainly because of an insufficient number of interpreters and in some cases their incompetence. Cultural differences and misinterpretations between patients and healthcare professionals tend to be problematic in some instances. The somatic and mental health of immigrants depends significantly on their experiences in home country, transit and in the host society. Their legal status is noticeably connected with participants' mental health conditions. The most devastated group in terms of psychosocial health is the asylum seekers at the deportation stage. Successful education, language acquisition and establishment in the labour market as well as an adequate living situation, improve psychosocial health conditions and a general feeling of being part of the host community. In turn, social isolation, frustration over lack of employment and hindered access to the social community can be detrimental to psychosocial health and slow down the integration process even more. Among the respondents, expressions of depression and feelings of pessimism post-arrival are found, which are not only related to the situation in Sweden, but also being an accumulation from experiences in the country of origin and transit.

The participants express that they have easy access to health services however some have mixed feelings. They feel that the care is insufficient: the time to get an appointment and a diagnosis is long, lack of compassion is shown by caregivers, sometimes one needs to be in a critical condition to be taken seriously, there is denial of access after rejections or in the deportation stage. In the cases of emergency and

healthcare for children, the access and services are prompt and efficient and praised by several participants.

Participants express that religion, children, family, friends, success, associations, work among others are meaning-making systems in their lives. Religion is mentioned as a broad meaning-making system providing values, protection, guidance, hope and strength in the host society. However, it is also found to be a source of direct negative outcomes resulting in self-destructive behaviour. According to participants children are the strongest meaning giving system in their lives being the source of happiness and a motivation to go forward. Family is expressed both as an important meaning-giving system and a coping mechanism, helping the participant to cope with the new society and forget about the past. However, the role of family as a positive or negative source depends on whether the participants are able to support the family, communicate with them, or have/had good relationships. Participants describe work and self-fulfilment as a crucial meaning-making system: to be able to work, to achieve something is the mantra to live for many participants. Also, being reflected in this section is the importance of family and significant others and their roles in the lives of participants. These are not constant for all rather for some. They are subject to change depending on the experiences they have had in the home country, transit and in the host society.

There are problems with interpretation, a shortage of interpreters, lack of expertise among interpreters, or problems in identifying language or dialect when booking an interpreter prior to counselling, resulting in delays or having an interpreter not being able to translate. Language barriers have also been a reason for not continuing psychological counselling among respondents.

Among the issues linked to perceived discrimination, are lack of compassion by caregivers, feelings of not being trusted, not given medicine needed, or being denied necessary care. The perceived discrimination is also linked to the rejection received.

7. Citizenship, Belonging and Civic Participation

7.1. Macro-level Information and Meso-level Interviews

In this section the macro-level information and meso-level interviews are interwoven. Though very few of the refugees interviewed in this study were from those arriving after the 2016 change of status and restrictions in Sweden, it is important to keep in mind that the whole of society, and the very conception of the welfare state, continue to be very much affected by and reflect this change.

In this section the Swedish rules for ordinary naturalisation are presented and compared to the Nordic countries and some other EU member states. In comparison, Swedish rules are considered to be the least complicated. This section also discusses how this process has been affected after the implementation of the 2016 Temporary Act on limitations of being granted a permanent residence permit in Sweden.

7.1.1. Regularization of Legal Status

The Swedish Aliens Act (2005:716) (SAA) regulates the entrance and presence of non-EU/EEU citizens in the territory of Sweden, through visa and residence permits. EU/EEU citizens and residents are subject to EU regulations and receive a residence permit after a three-month stay in Sweden (Shakra, Wirman, Szalanska and Cetrez 2018, pp 39, 40). The requirements, rights, entitlements, and length of residence permits differ depending on the foreigner's legal status and purpose of the visit or residency. The purpose of the residency can be for: seeking employment, seeking asylum, education, or family reunification, and accordingly regulations differ in each case.

The main legal provisions in the SAA, governing the different aspects of the protection-related definitions and asylum statuses, include three protection status categories: refugee (*flyktingen*), beneficiary of subsidiary protection or a person in need of subsidiary protection (*alternativt skyddsbehövande*) and a person otherwise in need of protection (*övriga skyddsbehövande*).

On 24 November 2015 the Swedish government proposed restrictive measures as an attempt to reduce the number of asylum seekers coming to Sweden. This Temporary Act (TA) changed the SAA through limiting the possibility for permanent residence permits and for family reunification, mainly for those with subsidiary protection status (Government Bill, 2015/16:174). After these major legal changes only asylum seekers granted asylum before 20 July 2016 received a permanent residence permit. This permit was given regardless of the granted legal status. Asylum seekers granted asylum after that date, were given a three-year residence permit if they were recognised as refugees, and a 13-month residence permit if they were recognised as beneficiaries of subsidiary protection. After 20 July 2016 only, quota refugees¹⁹ could be granted a permanent residence permit in Sweden. The third type of protection status (a person

¹⁹ The SMA defines the quota refugee as a person who has fled his or her home country and has been selected by the UK's refugee agency, UNHCR, to be resettled to a third country that offers them protection (SMA, 2020a).

otherwise in need of protection) was not granted in Sweden after the application of the TA (Government Bill 2015/16:174).

7.1.2. Access to Naturalisation and Citizenship: Legal Provisions, Criteria and Implementation

A. The current criteria and requirements for Naturalisation and Citizenship acquisition for the beneficiaries of international protection in Sweden

The Swedish Citizenship Act (2001:82) (SCA) stipulates clearly the different paths to obtaining Swedish citizenship under the main domains of citizenship acquisitions: naturalisation (application), citizenship acquisition by declaration, and citizenship acquisition by birth (Midtbøen, Birkvad & Erdal 2018, p. 40). The largest number of citizenship acquisitions in Sweden has been through naturalisation, which also has been the main path to citizenship for the beneficiaries of international protection (see Appendix, Tables 10, 11, and 12). The SCA states the following requirements, in paragraph 11, for a foreigner to be granted Swedish citizenship:

1. has confirmed his or her identity,
2. has turned eighteen years old,
3. has a permanent residence permit in Sweden,
4. has resided in the country
 - a. for two years in the case of a Danish, Finnish, Icelandic or Norwegian citizen,
 - b. for four years in the case of those who are stateless or classified as a refugee under Chapter 4. § 1 of the SAC,
 - c. for five years in relation to other foreigners (e.g. beneficiaries of subsidiary protection status),
5. had and can be expected to lead a decent way of life.

An applicant, who is unable to prove his or her identity in accordance with the previous paragraph, may only be naturalised if he or she has been resident in the country for at least eight years and can likely show that the identity stated is correct.

One of the recurrent themes in several of the micro level interviews, indicated that one of the main obstacles for obtaining Swedish citizenship, particularly for the Afghani residents, has been the absence of proof of identity and identification documents. A representative of an international crisis response and disaster risk management agency that provides legal aid and asylum and integration related counselling in Sweden confirmed this obstacle.

The majority of the unaccompanied Afghan asylum seekers who have approached us, were unable to provide identification documents to prove their identity. Their Tazkirah (ID card) is not acceptable as an identity document by the SMA and the Swedish courts too as it has too low security features. This has put them in a more vulnerable position in comparison to other asylum-seeking communities when it comes to credibility assessment, making them vulnerable to different circulating rumours that encourage them to either go into hiding or declare false histories, and thereby reducing their chances to prove their asylum, identity or be granted Swedish citizenship in a reasonable time. (SE_Meso_Interview_No18)

The SMA has a guideline concerning the identification documents of some countries of origin such as Iraq, Syria and Afghanistan. Such countries of origin lack reliable public

civil registries and have problems with issuing identity documents. Therefore, the SMA considers that, for example, Afghan identification documents do not prove the identity of the holder to the extent required for a proven identity in matters of Swedish citizenship (SMA 2019 a). However, the problems around issuing identification documents on a country level does not reduce the burden of identity proof for the individual's citizenship application. Thus, the burden of proof for certain nationalities is higher than for others, creating de facto-disadvantaged groups due to circumstances beyond the individual's control. For a comparison of statistics- based trends in the naturalisation of international protection cases 2016-2019 (see Table 13 in Appendix).

B. Processing the Citizenship Application at the Swedish Migration Agency

According to the SMA's annual report in 2019, the number of applications for Swedish citizenship remained at a historically high level during 2019 and citizenship cases have dominated the number of cases at the SMA. This is mainly due to the large number of people who were granted residence permits in Sweden, primarily in the asylum process during the mid-2010s and now applying for citizenship (SMA 2019 a, p. 109). The 2018 SMA annual report indicated that two factors negatively influenced the management of the citizenship cases and prolonged the waiting period of the decision making process in recent years: 1) the implementation of a new Administrative Act (AA) (Förvaltningslag 2017:900), and 2) the departure of many expert employees due to job insecurity.²⁰ The impact of the cut in the agency's budget and the dismissing of a large number of the SMA's employees were discussed with the SMA's civil servant during a meso interview, conducted on 19 February 2019 (Shakra & Szalanska 2019, p.43):

Yes, if we (the Swedish Migration Agency) had gotten more money and could have kept more persons employed and made this transition over a longer time, we would have less of a negative effect on the schedule, but it is not up to the SMA. It's up to the government to give us funds. And that's also something hard {referring to the long government -forming process after the elections and late delivery of the budget} because if we had gotten the budget as usual quite soon after the election, we would have known how 2019 would look and would have had a much easier process to oversee everything and plan. (SE_Meso_Interview_No1)

According to the SMA's 2019 annual report, the total average processing time during 2019 had increased in comparison to the previous year (SMA 2019 a, p. 111). This was mainly due to the continuously large number of applications and the significant increase in the number of determination requests for a decision pursuant to paragraph 12 of the AA.²¹ Before the implementation of the AA, the processing of citizenship applications

²⁰ The reasons behind the departure of the SMA's expert employees are mainly related to the uncertainty of future employment at the SMA (SMA, 2018 a, p.112). As a response to the extraordinary number of asylum-seeking applications at the end of 2015 in Sweden, the SMA's number of employees grew between 2015 and 2016 to just over 8,400. By the end of 2017, the need for staff decreased sharply as the number of asylum seekers coming to Sweden also decreased. During 2018 about 2,000 employees left the SMA of which 600 employees were laid off, and 1,400 employees left during 2019 with 100 laid off. The SMA's employees are currently 5,900 (SMA, 2019b).

²¹ Paragraph 12 of the new Administrative Act (AA) (förvaltningslag 2017:900) states: if a case initiated by an individual party has not been settled in the first instance within six months, the individual party may request in writing that the authority shall determine the case. The Authority shall, within four weeks from the date of such a request, either decide the matter or, in a special decision, reject the request. The rejection of the request can be appealed to the court or to the competent administrative authorities, which can review the appeal application.

had been run on a queue system based only on the date of application. After the implementation of this act in July 2018, those who applied after passing the six-month waiting period would go forward in the queue. While those who had waited longer in the queue and who did not apply after passing the six-month period, now had to wait even longer in the queue. The SMA had to prioritise the determination requests for a decision over those who had waited longer in the queue system (SMA 2019 a, p. 111). For the breakdown of submitted cases 2016-2019 see Table 10 in Appendix. For a comparison of statistics-based trends in the determined cases 2016-2019, see Table 11 in Appendix.

C. Citizenship Requirements for Beneficiaries of International Protection

Sweden has the least complicated set of rules for ordinary naturalisation among the Nordic countries and the EU member states. Unlike requirements in other Nordic or EU countries that include a certain level of language proficiency, a citizenship test, a societal orientation test (*samhällskunskap*), self-support, and an oath of allegiance, none of these are included in the set of requirements for naturalisation in the Swedish Citizenship Act (SCA) (section 11). Sweden took away the requirements of self-support, language proficiency and a seven-year residency period in 1974 in order to improve integration conditions (see SOU 1999:34, p. 59) and introduced a prohibition against the deprivation of citizenship into the Instrument of Government (Midtbøen, Birkvad, Erdal, 2018, p.33). However, on several occasions there have been requests or statements by politicians and officials in different political parties to introduce new obligatory requirements for the newcomers or asylum seekers, for example a society orientation test (Svantesson 2019). These proposed requirements were actualised in the so-called “January agreement” (Riksdagen 2019). In this agreement the issue of social orientation for the newcomers and asylum seekers was part of the substantive political agreement, concluded in early 2019, among the Social Democrats, the Centre Party, the Liberals and the Green Party. Among the efforts mentioned was that social introduction and teaching or social orientation in Swedish would be compulsory from day one in Sweden, and that more and improved social orientation -100 hours -, would begin already during the asylum period for the same group (Riksdagen 2019). In addition, knowledge of the Swedish language and basic social literacy would become a requirement to obtain Swedish citizenship in order to strengthen citizenship status and promote one inclusive society, as stated in the draft of this agreement (Social Democrats 2019). The county council in Jönköping region was given the task of investigating the areas for social orientation. Social orientation would include early and clear information about Swedish society, rights, duties, possibilities as well as its norms and values such as equality and children’s rights (Regeringen 2018). Granting citizenship in Sweden is a task of an executive administrative agency, which is the SMA, and room for discretion is determined by legal, judicial and administrative process and practice. Sweden took a positive step towards dual citizenship through legal changes in the 2001 Swedish CA, which was not the case in the previous acts (Bernitz 2012, p 1). For a comparison of naturalisation requirements in the Nordic countries, and Germany and France see Table 14 in Appendix.

D. Access to Rights with and without Formal Citizenship

Obtaining citizenship includes entitlements, rights and duties. Those with permanent residence permits in Sweden, who are registered at the Swedish tax authority, have the same entitlements or rights and duties as Swedish citizens.

The SMA's website enumerates these rights and benefits which, it can be noted, also residents with permanent residence permits enjoy (SMA 2020 d):

1. Only Swedish citizens have an absolute right to live and work in the country and only Swedish citizens have the right to vote in the elections for the Swedish Parliament.
2. Only Swedish citizens can be elected to the Swedish Parliament.
3. Only Swedish citizens may join the police or armed forces. There are also other occupations, which are only available to Swedish citizens.
4. As a Swedish citizen, it is easier to work in other EU Member States.

On the other hand, residents in Sweden with temporary residence permits do not enjoy many of the above-mentioned rights and privileges.

E. Granting Permanent Residence Permits and Access to Citizenship and Family Reunification since 2016

The legal changes since 2016 have limited substantially the access to permanent residency permits. This has implications for eventual citizenship acquisition and certain rights such as that of family reunification. This brief overview of changes provides a foundation for understanding the connection among citizenship, legal status, access to rights such as the right to family reunification on one side and the feeling of belonging and inclusion in the new society on the other side in the next paragraph.

The process of citizenship acquisition and naturalisation cannot begin without a permanent residence permit. This requirement has become the hardest to meet, particularly for the beneficiaries of international protection since 2016 after the introduction of the maintenance requirements in the TA. The main goals for the introduction of the TA were, as explained above, to limit the possibility for permanent residence permits and for family reunification, mainly for those with subsidiary protection status (Government Bill 2015/16:174). Sweden, through the introduction of the TA, has shifted its migration and asylum policy from the most liberal and generous in the EU to one that reflects only the minimum EU level. This shift, after 2016, reflects a marked change away from that driven by the Swedish model of the welfare state built on the norm that all residents should have equal and universal access to certain fundamental formal rights (Borevi 2014, 2017).

The legal changes introduced in 2018 after the approval of the Government Bill (2018/19:128) to extend the TA, facilitated the possibility for family reunification for a group of beneficiaries of international protection under certain conditions and requirements. However, these legal changes did not make it easier for changes from protection permits to job permits, a change that makes it possible to move from a temporary residence permit to a permanent one. These legal changes would give the same right to family reunification to beneficiaries of subsidiary protection statuses as to a resident with refugee status. Although those beneficiaries of subsidiary protection statuses were exempted from the maintenance requirements, there were certain other

conditions that should be met.²² The main condition was: if the person is deemed to have a good chance of receiving a permanent residence permit (SMA 2020e).

In fact, the beneficiaries of international protection who did not meet the stipulated conditions in the legal changes after the extension of the TA were still subjected to the maintenance requirements and the limitation in the right to family reunification. This situation has put some residents with refugee- and asylum backgrounds under a great deal of pressure and has compelled some to go through the route of an irregular job contract (Borevi and Shakra 2019, p. 38). During a meso interview a Swedish migration lawyer described her experience with this situation after 2015.

The thing we hear quite a lot is that people pay their taxes to Skatteverket, and these are the taxes that have to be paid by the employer. So they do pay them, but then they {the employers} are given back the money in cash, the same amount the person would have paid if they had come here through a smuggler! They pay that in a white kind of underground system in Sweden. And they pay that for four years to be able to get a residency permit. So it's very difficult, and we should not forget that Sweden is one of the countries that is the hardest place to find a job, because they always require you to speak Swedish fluently, and there are basically no jobs, and they try to create jobs and sometimes they don't even work but just pay taxes. And paperwise it looks like they are having a salary. (SE_Meso_Interview_No19)

A civil servant working in the job permit section at the SMA, described his experience and views concerning the possibilities to change the line of legal status from protection to work permit since the application of the TA in Sweden on 24th March 2020.

The possibilities to move from a temporary residence permit on protection grounds to a permanent one through a job/work are limited. In today's situation, there is a very low percentage who have managed to obtain a permanent resident permit through work and its regulation in the TA (Article17). (SE_Meso_Interview_No10)

The same civil servant from the SMA also explained which of the requirements in the TA have made it very difficult to obtain a permanent residence permit.

We see a significantly higher proportion of people with jobs, but they rarely meet all the requirements. Many newcomer migrants have jobs that are in some way subsidised or do not have enough duration in their employment (at least two years), which appears to be the most difficult requirement for them at the present time. (SE_Meso_Interview_No10)

The RESPOND research team reached out to the SMA's statistics department asking for the number of beneficiaries of international protection who managed to change their residence permits from temporary to permanent under the second and third paragraphs in Article 17 in the TA. From 2017 until March 2020 the number did not exceed 1000 cases while the number of granted temporary residence permits to beneficiaries of international protection exceeded 70 000 permits from July 2016 until December 2019. (see Table 15 and 16 in Appendix).

²² According to the SMA's prognosis, about 8,000 family members of the beneficiaries of subsidiary protection status could be reunited with their family members in Sweden (SMA, 2019b).

7.2. Experiences of Citizenship and Belonging

The approach in this section differs somewhat from the other sections. Here macro and meso analysis and interviews do not necessarily correspond to the questions in the micro interviews and analysis. During the time of the study the drastic changes in immigration policy outlined above were on the horizon and then implemented. In this respect the macro and meso analysis and interviews provide the backdrop for this micro level section, as a sense of stable belonging in a society is in large measure dependent upon a trust of permanency, a hope for and path to citizenship. The data in the macro and meso levels present the very real legal and policy restrictions that in the short- and long-term affect newcomers' feelings of belonging. For example, as the meso interview above explains, the limitations in the right to family reunification can negatively distract their efforts from integrating into the Swedish society and feeling at home.

The data contained in the micro, individual interviews involve complex themes and concepts, which emerged through the thematic analysis. These fall into Nira Yuval-Davis' (2006) three level model of analysing the lived experience of belonging in relation to permanency and ultimately to citizenship. The multi-level relationship between belonging and citizenship brings attention to the politics of belonging, and forms the fourth level. The presentation of the micro interviews in this section differs somewhat from the preceding section, as the perception of belonging, which plays a central role here, is something experienced. Laws, policies and praxis influence this perception. However, belonging is essentially an experience of inclusion.

Level 1: Social Locations

When people belong to a particular gender, or race, or class or nation, or identify that they belong to a particular age-group, kinship group or a certain profession, what is being talked about are social and economic locations, which, at each historical moment, have particular implications vis-a-vis the grids of power and access. Belonging and the identity markers associated with that are never an individually construed matter. The social context and its legal as well as applied policies and practices determine to a great extent the limits of social location. Three themes are explored.

Theme 1: Neighbourhoods and Belonging

As is amply indicated in the changing migration and status policies previously presented, there are important differences among the respondents related to status, actual physical location in the surrounding neighbourhood, as well as experiences of and perceptions of interactions with their neighbours. Bonding patterns with one's own ethnic group are evident, easily with people from the same place/region "relationships with people from the same region in Syria" (Syrian man, Age group 27-50, No.27, Permanent residence permit). The majority come from group- rather than individual-focused societies and thus have the motivation to engage and make friends with the Swedish community. However, many mention having an experience of what can be described as cognitive cultural dissonance between Swedish culture and their home context.

In Syria the neighbours and I were very friendly, we used to visit each other, we were like family. Here it's not, if your neighbour sees you in the elevator he wouldn't say 'Hi' to you. (Syrian woman, Age group 27-50, No.8, Family reunification)

Many asylum seekers report living in neighbourhoods with other Afghani or Syrian migrants as neighbours, thereby limiting contact with the wider community.

Yes, it is very important to meet Swedish people and other members of the community. But how should I do that? Most of them here are Arabs. It is a disaster in terms of trying to meet other members of the Swedish community, too isolated. (Syrian woman, Age group 27-50, No.8, Family reunification)

Those having permanent residence status present a more varied pattern of interaction as they are often in more integrated neighbourhoods. Some mention having very good relationships with their Swedish neighbours. Others perceive this relationship as respectful yet with a perceived underlying mistrust, experienced as some as a form of “discrimination” linked to their religion or nationality.

I did not feel any problems in Sweden in general or with racism, but that does not mean that there is nothing at all. For example, our relationship with our neighbour is not good, and we feel there is a discrimination against us. But, nothing happened directly. (Syrian man, Age group 27-50, No.27, Permanent residence permit)

Yes, I have contact but around me are only Afghani people, Swedish people do not want to talk. We don't have contact with them, just with Afghani people. (Afghan man, Age group 27-50, No.50, Asylum seeker)

Understanding limitations for integration related to housing issues can be summarised as contributing to social isolation related to location and/or the necessity for frequent relocation.

If you want real integration, you let us live with the community. Next to you a Swede and near you a German. In such a way you can make the right integration. But not to build a house in the forest and let just Syrians live there. Then you ask them to integrate (Syrian man, Age group 27-50, No.15, Permanent residence permit)

Our dataset in general, showed that a close and friendly relationship with neighbours in Sweden was experienced by 28 respondents (46%), among which the majority were men (57%).

Theme 2: Language Acquisition

Social location and perception of belonging is also dependent, in large part, upon the host culture's programmes for integration related to language acquisition. Language acquisition makes possible a deeper level of communication with the majority community, and the daily performance of tasks dependent upon knowledge of the Swedish language. The experience of the Swedish integration establishment programme, with a primary focus on learning the Swedish language, for many of those interviewed, has been understood as an essential part of the integration process, a necessary step leading to further study or entry in to the labour market as well as a means for economic sustenance during the initial time in Sweden, especially for those under temporary protection status.

The integration establishment programme was very important for two years. I received a salary to study language at the SFI course. Then I have a background in the language and then you can start a university degree. This programme helped me financially to run my life errands but after two years the challenges increased so I had to be prepared for them. So, this programme is beneficial to get ready for

those challenges. (Syrian man, Age group 18-26, No.17, Temporary Residence permit)

Theme 3: Civic Participation

Forms of- and degree of civic participation for the respondents are diverse. As has been shown in other studies with migrants (Silove 2013; Boyd-MacMillan & DeMarinis 2020; DeMarinis 2014), active engagement in the home country is repeated, where and how possible, in the new host country. Those who had followed the news in Sweden also followed the news back home. Our dataset showed that involvement in political activities in Sweden or in the country of origin was reported by a minority (n=6, predominantly men). Some, a minority in this sample, who had been more actively engaged in politics such as political parties or movements in their home country, look to find this same type of engagement in Sweden.

Generally however it seems safe to say that the political issues newcomers are interested in are related to their actual daily-existence situation. Topics related to social welfare and social integration that could directly impact their lives are primarily mentioned by newcomers, so are parties on the left spectrum of the political spectrum such as the Social Democrats.

Since the respondents are not yet citizens, and many will most likely never be granted citizenship, they naturally have a limited capacity/ability to take part in many aspects of civic and political life. Continuing in the same track, asylum seekers are involved in associations and civil society organizations that deal with social issues. More specifically, those who have been in Sweden for a longer period of time, engage in associations that help more freshly arrived refugees, as they have had similar experiences.

The Aga Khan Development Foundation which has nothing to do with my home country is a global organization that helps refugees, and I participate with them to support the refugee's children to learn the English language. (Syrian woman, Age group 27-50, No.33, Permanent residence permit)

Civil Society Organizations, such as language cafes or other voluntary community projects, are mentioned by a number of respondents to have had a positive impact on their feelings of belonging. Creating a space where they feel welcomed and a place they like to come back to.

Yes, I still feel that. For example, when I go to the place where we usually meet to learn the Swedish language, and I go to a group of people who are sitting together, they welcome me and offer me coffee and ask me to join them. People here are kind and smile at each other. (Syrian man, Age group 27-50, No.4, Permanent residence permit)

Level 2: Identifications and Emotional Attachments to Various Collectivities and Groupings

Constructions of belonging are not meant to be understood as merely cognitive stories. They reflect emotional investments and desire for different kinds of attachments. These identifications and emotional attachments are linked to how individuals and groups make meaning. Central patterns of existential meaning are important for shaping these

identifications and attachments. Religion is, for the majority of the respondents, one of the most central existential meaning frameworks.

Religion is an important part, if not the most important part, in the lives of the respondents. When asked to do the circle exercise²³, most put themselves close to religion.

The closest thing for me is family, religion is important, my spiritual life I mean. (Syrian woman, Age group 27-50, No.26, Family reunification)

God is closest to me, after God, comes my Family. (Afghan man, Age group 27-50, No.50, Asylum seeker)

Some respondents mention that their attachment to religion could be in the way of “total integration”, because it is something they would not compromise. Since, religion serves as a source for values and principles. Giving up values and principles in exchange for Swedish secular values would mean compromising/limiting their religion which is something that most are not willing/ready to do. Others feel that religion has no impact whatsoever, and that it is something individual – that the Swedish state or society should and cannot intervene in – but also that the newcomers should keep to themselves.

Religion is a personal matter, and no one has the right to intervene in it. I see this matter respected in Sweden. Everyone has the freedom of choosing his religion and nationality. I appreciate this country in this respect. (Syrian woman, Age group 27-50, No.2, Permanent residence permit)

Belonging and the process of integrating into a new cultural context is coupled with how the meaning-making process used by an individual as part of a group can fit in with the meaning-making process of the new cultural context. For a few of those interviewed, there are perceptions of the new host culture appearing to make demands for integrating that challenge the essence of what it means to belong in terms of existential meaning, a forced integration through sacrifice of their religion.

Integration can be forced. For example, lots of youths here got their asylum rejected and they were being forcefully converted to Christianity so that they are able to stay here, and this has a very negative impact on them. They have to give up their religion just for permission to live here. (Afghan man, Age group 18-26, No.48, Asylum seeker)

The price for this belonging, as interpreted by needing to change religions, is therefore understood by some as not possible to be paid. This is perceived as discrimination based on religion. Whereas for others, the main goal of access to rights and belonging in the Swedish context may lead to acceptance of conversion from Islam to Christianity if such was understood to be the only way to being granted permanent residency and reduction of discrimination in society. This decision is not an easy one, and has no guarantee of reversing a rejection.

²³ As a part of the RESPOND interview, adapted for Sweden, each respondent was asked to draw several circles in relation to each other. Each circle symbolised one dimension: the respondent, his or her family, religion and Swedish society; and how the person linked to these circles.

Our rejection was seven months ago, so we are waiting. My husband became Christian, so we tried again. (Afghan woman, Age group 27-50, No.53, Asylum seeker)

For some who have been granted permanent residency, the sense of their religion not being understood is experienced as an impediment to integration and to a greater sense of belonging.

The sense of belonging and feeling integrated to a greater or lesser extent is dependent on many interacting factors. Though each individual's case is unique, certain common factors such as the living situation and type of neighbourhood, the time spent in Sweden, the degree of positive or negative interaction with local Swedes, the work situation, and current legal status all contribute to the perceptions of belonging and degree of belonging as well as integration.

Participation in civil society groups, such as language cafes or other voluntary community projects, are mentioned by a number of respondents as having had a positive impact on their feelings of belonging. A recurring theme is not only the act of participation in such groups but also the creation of a safe and welcoming space to be, often in contrast to other spaces.

Level 3: Ethical and Political Value Systems of Belonging(s)

Belonging is not just about social locations and constructions of individual and collective identities and attachments but also concerns the ways these are valued and judged. Closely related to this are specific attitudes and ideologies concerning where and how identity and categorical boundaries are being/and should be drawn, what can be more or less exclusionary, and in many respects more or less permeable. Naturally, the topics of these social locations and constructions of both individual and collective identities are shaped by societal values and areas of possible divergence in these values and how they are understood. Recurring areas emerged in the interviews regarding themes of interpersonal relationship and how means of relating take place in the societal context of Sweden. These themes often highlighted the perceived and sometimes experienced differences between societal values and areas of divergence between the culture of origin and the Swedish culture. However, it is important to note that the interviewed individuals did not all respond in the same way. Five themes occurred frequently in the interviews. A short analysis of these themes related to belonging is provided at the end of this section.

Theme 1: Societal equality between men and women in Sweden

There was a range of responses. Some voiced a degree of support but with reservations.

Sure, equality between men and women is good but in some cases I think it's way over, like I don't think that a woman can possibly drive a tractor but for them it's quite possible. I think that a woman should work in a more softer section but that doesn't really work for them and they would consider me lagging behind. (Syrian woman, Age group 27-50, No.8, Family reunification)

Others voiced a similarity of values on equality between the home and host cultures.

My values are similar to the values that exist here in Sweden. Regarding the equality between men and women, within my family and from my past life, we

believe that men and women are equal, and they should both be respected equally, and they have equal rights. I have children, boys, and girls, and I don't see any difference between them, I love them equally. Even in my relationship with my wife, there is respect, we respect each others' role and rights. (Afghan man, Age group 27-50, No.61, Permanent residence permit)

Others noted a change over time and experience of being in Sweden.

I see the differences and it has changed me. I'm not the same person I was in Afghanistan. Here it's different, between men and women and raising children so I do things differently. It has influenced me because I helped her to deliver the baby! In Afghanistan, no man would think of doing such a thing. In Afghanistan, women help other women [in childbirth] and men aren't allowed anywhere near, but here I saw that it's an important thing to be with your wife and hug her as she delivers a baby, it's a big thing. I was helping her, cleaning and taking care of my other children. It influenced me a lot. (Afghan man, Age group 18-26, No.51, Asylum seeker)

Theme 2: Liberal sexuality, and an openness to sexuality

Some respondents had a perception that there is too much freedom in Sweden and many connected this to a strong sense of gender equality.

I find it too much here, because it is more free than limited. I heard from my friends that there is a man who has a girlfriend. When she sees another man she likes more she will leave her boyfriend and go to the new one without any reason (Iraqi man, Age group 50+, No.45, Asylum seeker)

My principles have not changed, they are the same principles that I have had in Syria. Here, for example, the majority of people consider that premarital sex is permissible and acceptable, but for me, it is not allowed, and this is my conviction. (Syrian woman, Age group 27-50, No.25, Permanent residence permit)

The gender theme can be viewed as a subtheme here, and was raised in relation to how leisure activities are enjoyed with no separation of genders.

No, they have freedom and body language. They love their bodies. They see it as a normal thing to let girls and boys swim together in the pool. We don't have such a thing in Syria. The Muslim would feel it strange. We can't say that they are infidels because they feel it is normal and so be it, but it's not necessary to do or adjust to it. If it was obligatory to do it, I wouldn't know the reaction that it could cause. (Syrian woman, Age group 27-50, No.8, Family reunification)

Theme 3: Homosexuality

Here, a range of perceptions related to homosexuality was evident. There were some voicing an extreme view of homosexuality as wrong, against homosexual marriage and perceiving homosexuality as a danger to the social fabric:

In my opinion it's totally wrong, even Swedish people, some of them criticize it. Homosexuality also exists in our countries but secretly, in Sweden it's public. To be honest, this thing to be in public is really annoying. [...] For kids, seeing bad scenes related to this, is really bad. I didn't like it at all, I told you it's there in every society, even our native one, but here when a child sees such behaviour. [...] I feel that this hurts his childhood and innocence, a lot of this happens in the metro and

I think it hurts the child's feelings and innocence, for me it's very annoying. (Syrian woman, Age group 27-50, No.30, Permanent residence permit)

A lot of things changed in my mind. I had many new ideas I thought were difficult to change but it turned, and I became more open. Such as homosexuality. I did not accept it, and I did not want to talk about it before, but after I came here and after many discussions at the university and with my professors I discovered that the truth has many aspects. So I now see this thing from a positive perspective and not negative, as a researcher to search for the truth objectively to see where is right and where is wrong. At the same time, my life with my wife has not changed too much. (Syrian man, Age group 27-50, No.3, Permanent residence permit)

According to our culture, it's not acceptable at all. [...] One can't name/call it a marriage if the couple are of the same gender. [...] They should name it something else, not marriage. I don't mind a couple of the same gender living together under one roof, but don't call it marriage. [...] This is against human nature. It's not individual freedom, no not an individual freedom. [...] It's community freedom. (Syrian man, Age group 50+, No.1, Permanent residence permit)

The range of perceptions also included those who have experienced a change in their perceptions of homosexuality after being in Sweden, often through experiencing interactions with persons who identified as homosexual.

I have thought freely about these people since I was in my country but I did not accept them and I do not accept that one of my family practices. But after I came to Sweden I found that they lived here naturally and did not hurt anyone, I accepted them and they helped me to read, watch and meet with homosexual people. But I still do not accept the practice of one of my family members. (Syrian woman, Age group 50+, No.28, Permanent residence permit)

Theme 4: Different forms of relationships such as sambo, living together arrangements not being married

Many had reservations about such arrangements.

My comment is, I need responsibility to relate to someone. In sambo [living together, not married] for instance there is no paper so I will not be obligated and I will do whatever I want and I can break up whenever I want. Maybe I can have a kid and I'm still not committed. I think family relations need commitment because there will be kids involved. (Syrian man, Age group 27-50, No.40, Permanent residence permit)

Some however understood these arrangements in the larger context of the Swedish society's ways of understanding relationships. To some degree, there was a gender difference. Men were usually more concerned about the risks involved in living outside of marriage if no legal obligations could be enforced. Some women found such arrangements as allowing for greater freedom, in the context of other kinds of legal and social protection provided by Swedish society.

In my country, it would be unacceptable but here since they gave me a life of freedom to live with my kids, why do I object to anyone living with someone they want. It's a different view of social relationships and it's a part of the nature of the society. (Syrian woman, Age group 27-50, No.23, Asylum seeker)

Theme 5: Raising children

This was an important topic in the interviews. Many respondents noted some strong differences between the systems of raising children.

A child here is the son of the State and the State is responsible for it. While the child is considered the son of his family in the Arab countries or third world countries. In addition, a child can call the police on his or her parents if he or she is physically or psychologically mistreated by them. Unlike the child in the Arab countries, who can be violated, tortured and beaten and no one can be held accountable or sued. I think that educating children here has their pros and cons as well. I also think that it is difficult to cope with this situation for the Syrian communities, especially those who came to Sweden with their children. They are used to dealing with their children in the Arab way. For those who got married and had children here, the difficulty would be less. (Syrian woman, Age group 50+, No.28, Permanent residence permit)

There was a range of responses about the different systems. Though many found the idea of adjusting to the Swedish system difficult and not a goal for their future, some expressed the positive dimensions of the Swedish system, and found it a better system. Here a gender difference was noted, with a greater number of women noting the advantages of the system for themselves and their daughters.

I think there's a difference from my culture but I think it's for the best. Personally, I think my kids are doing better. In their self-confidence, I feel my kids are stronger. Maybe it is because of my experience, but I think my kids can go anywhere they want. My daughter takes two buses and she can move and she's very happy that she's confident to go by herself. In Syria, I could not send my daughter to school by herself and I would be afraid even before the crisis. I'm happy about it that I have confidence and they can live their lives. There are some points I disagree with or that need limits, but I agree with this kind of parenting. (Syrian woman, Age group 27-50, No.23, Asylum seeker)

Under Level 3 five themes were presented. In each of these the range of responses were given. Naturally, each of these themes emerging from the micro interviews is connected to perceptions and experiences of importance for understanding belonging. At the core of belonging is the feeling of being included. Where underlying value systems and societal behaviours are very different, the feeling of belonging when moving from one cultural context to another, especially in situations of forced migration, can be a difficult process. However, analysis of the interview data reveals four important points. First, belonging is in some respects part of a process that takes place over time. The degree of exposure and experience to a new cultural context can assist with a sense of belonging, provided these are perceived as positive. Perceived negative experiences and exposures will entrench a sense of being excluded. Second, there is always a balance between individual and collective identities. Though from the same culture and background, individuals may have different ways of understanding and relating to underlying value systems and societal norms. This can also be the case within the same family by generation and also by gender. Third, a sense of belonging and the feeling of inclusion in a new cultural context is never an all or nothing process. Often there is a negotiation of areas of belonging, and this is a dynamic process. Fourth, a sense of belonging is both psychologically and socially dependent on feeling that the present situation will allow for future dreams for oneself and one's family to be fulfilled. In this

respect, a sense of stable belonging is inevitably linked to the security of permanence, of citizenship or its equivalence in the new country of residence.

Level 4: Citizenship and the Politics of Belonging

Though the political project and process of belonging is primarily based on the identificatory and emotional level, it also assumes adherence to specific political and ethical values that are seen as inherent to good democratic citizenship (Yuval, 2006). Two central themes are explored.

Theme 1: Gaining citizenship

Few of the participants referred to the actual process of gaining citizenship. Those that did, usually had specific reasons in terms of thinking ahead and gaining the security of citizenship on both legal and psychosocial levels.

We know that we have a future life here and that we are going to stay and live here as Swedish citizens, and we are looking forward to our future here in Sweden. This thinking improves our psychological health. (Syrian man, Age group 27-50, No.6, Permanent residence permit)

For some the thought of citizenship was linked to an identification with the political and ethical values that such would bring, in contrast to what was experienced in another context, and related to fears concerning protection and custody issues.

The residency. The citizenship. I want to have a place to live, not to move again and again. I am going to start from zero and I do not want to move after that to start all over again. Honestly, I am not here for citizenship. I am here just to find a place to live in peace. I did not want to come to Sweden because of my ex-husband but after surviving being in the hospital, coming here was a sign from God. I think if I moved somewhere else I would lose my children. (Syrian woman, Age group 27-50, No.29, Permanent residence permit)

For others, citizenship was not the primary goal, as at the time of the interview some felt that they already had citizenship, a nationality.

It was in my mind but it was not a target. If I didn't have a nationality I would have thought about it. (Syrian man, Age group 27-50, No.34, Permanent residence permit)

Others voiced the experience of discrimination for their citizenship of origin.

Yeah, citizenship... I only have the Syrian citizenship which is detested all over the world... the media all over the world present Syrians in a bad/detested image. (Syrian man, Age group 50+, No.1, Permanent residence permit)

In general, though with some exceptions, the participants' responses showed a limited knowledge about their actual rights and access to legal aid. There was a general feeling that the lack of a Swedish or EU citizenship together with the stigmatization of a Syrian/Afghani/Iraqi citizenship is very limiting.

Theme 2: Experienced challenges in the process towards citizenship and belonging

Many respondents voiced concerns about the lack of being able to get information from state institutions, especially the migration agency, about legal statuses/opportunities and rights.

They never respond and I never get help from them. (Afghan woman, Age group 27-50, No.52, Asylum seeker in deportation stage)

These ranged from the right to attend language classes to the right to legal assistance. For many this lack of information or assistance left them feeling limited, imprisoned or being tied up because of actual or perceived situations of limited rights and a lack of access to citizenship. Some have expressed feelings of injustice over the difference in time needed for becoming a citizen and how that time has been a burden for moving on and belonging to Swedish society.

My friend got citizenship in 17 days because she's Palestinian. Syrians wait two years and Palestinians get it in a couple of months maximum. This is not racism because Palestinians have no home. But I want to be treated the same way because I don't have documents either. They need to be just/fair with us... I studied through the internet and I paid for my education because I feel imprisoned here and I can't leave due to papers. Legally, I should have received citizenship one year ago. They've been studying my application for two years. They stopped my life for two years and that's negligence. This is racism. (Syrian woman, Age group 27-50, No.24, Permanent residence permit)

For others the experience of perceived discrimination has been coupled to identity and the expression of such has been a hindrance to the process of belonging.

I experienced racism because I was wearing the Hijab but when I took it off racism just stopped, I don't really remember positive things because I went into a depression when I started to apply for asylum and it continues until today. (Syrian woman, Age group 27-50, No.5, Permanent residence permit)

At the time of the interviews more than half of the participants already had permanent residency, and the restrictions for those coming to Sweden after 2016 were not applicable. In this respect, a basic sense of security and permanency was there for those in this group.. However, a sense of identity and belonging was not a simple nor static process. The politics of citizenship, beyond the legal classification, was an important topic for exploration of the perceived gains and losses such entailed, and the freedoms and restrictions such would bring to familial function and daily life experiences.

7.3. Summary

As the statistics in Table 5 show, over half of the respondents in the interview study had permanent residency status.

Table 5. Legal refugee protection (Status), by frequency and percentage

Legal refugee protection (Status)		
Permanent residence permits with refugee status or subsidiary protection status	32	52%

Temporary residence permits with refugee status or subsidiary protection status	9	15%
Temporary residence permit under the Upper Secondary Education Act	2	3%
Asylum seeker	9	15%
Asylum seeker at deportation stage	6	10%
Family reunification	3	5%

As documented above, such status grants basic life security, within Sweden and the EU has the same entitlements, and provides a pathway to citizenship. This is perhaps why the topic of citizenship did not arise more spontaneously in the interviews for this group. However, it did arise as an important theme related to the larger topics of integration and belonging, not just in an abstract sense but in their day-to-day living encounters. It is also important to keep in mind that after the TA in 2016, many persons living as neighbours, from the same ethnic minority population, home village, even extended families, are living in Sweden under very different current and future circumstances. Since 2016, the SMA's statistics illustrate that only a very small number of beneficiaries of international protection have managed to change from a temporary to a permanent residence permit based on work. The change since 2016 is a change not only for asylum seekers, but for all of society. The Swedish welfare state has changed, and as a civil servant at the SMA expressed during a meso interview, it is citizenship, or the hope of gaining such, that creates a sense of belonging. Some of the respondents in the micro interviews mention the increased perceived stigmatisation from the majority culture that seems to be linked to their nationality and prior citizenship. Such perceived stigmatisation leads to the consequences of limiting one's actions, draining initiative, and reducing a sense of freedom. A general feeling of belonging is limited. Interaction and social contact varies widely, and is linked to an array of often interacting factors such as geographical location, language skills, general engagement pre-migration, perceptions of existential meaning-making and value systems, and actual experiences of interaction with members of the host society. Cultural understanding and perceptions, not least in relation to the degree of perceived and experienced respect for the individual's existential meaning-making and value systems, seems to influence the feeling of belonging and attachment to the host country's perceived existential meaning-making and value systems. For some, values connected to gender and sexuality are met with reservations. However, values and beliefs remain highly personal and individual, ruling out simplistic generalizations. Our interviews revealed that legal refugee protection status, gender, and educational level have implications for participants' perceptions and experiences concerning labour, education, housing, health, and belonging. An important gender difference was found, where women to a greater degree expressed living in a vulnerable situation and experiencing greater problems in relation to labour, education, housing, and health. Furthermore, lower educational background, uncertain status in Sweden, negative conditions in the labour market, lower educational opportunities, and various expressions of ill-health seem to be linked in different ways and to different degrees when examining the individual life stories of the participants.

8. Public Mental Health Promotion and Integration

In this chapter we reflect on this integration report in the light of public mental health concerns and possibilities that have arisen in this report's focus on the micro level interviews – the lived stories of women and men who have journeyed to Sweden in the hope of finding refuge and a place to safely be and belong. This chapter provides a framework for approaching the recommendations in the final chapter in terms of their importance for the general psychosocial health and wellbeing of refugees and other migrant groups as well as for society as a whole.

This section is organised as a series of three questions to facilitate an understanding of the links between public mental health promotion and the complexities of integration for refugees and other migrant groups in a host society with a new cultural context.

1. Why is it important to think about public mental health promotion when working with integration?

A predominant area in mental health and for that matter somatic health studies on refugees and other migrant groups in post-migration public health and public mental health research is that of the social determinants of health (Hynie 2018). Pre-migration and migration factors and experiences are naturally important references for understanding the mental health of refugees and asylum seekers. However, research also clearly indicates that refugees' and asylum seekers' mental health is greatly influenced by the conditions that they live in post-migration (Bogic et al. 2015). Different rates of mental disorders are observed in different countries, with classic distinctions made between low- and high-income countries. Those residing in refugee camps in low-income countries show the highest prevalence of anxiety and depression, reflecting the highly stressful conditions typically encountered in the camps. Yet, rates of mental distress and ill-health also vary among high-income countries, and these differences have also been tied to exposure to stressful events because of material and social conditions for refugees and asylum seekers there (Bogic et al. 2015; Alfadhli & Drury 2016). The impact of exposure to these stressors may also be cumulative. An increased length of displacement is associated with poorer mental health outcomes (Siriwardhana 2014), suggesting that the long-term mental health of refugees and asylum seekers may deteriorate because of resettlement into highly stressful settings. Consequently, those working in refugee mental health are calling for models that recognize and address post-migration conditions and the social determinants of refugee mental health (Mawani 2014; Miller and Rasmussen 2016).

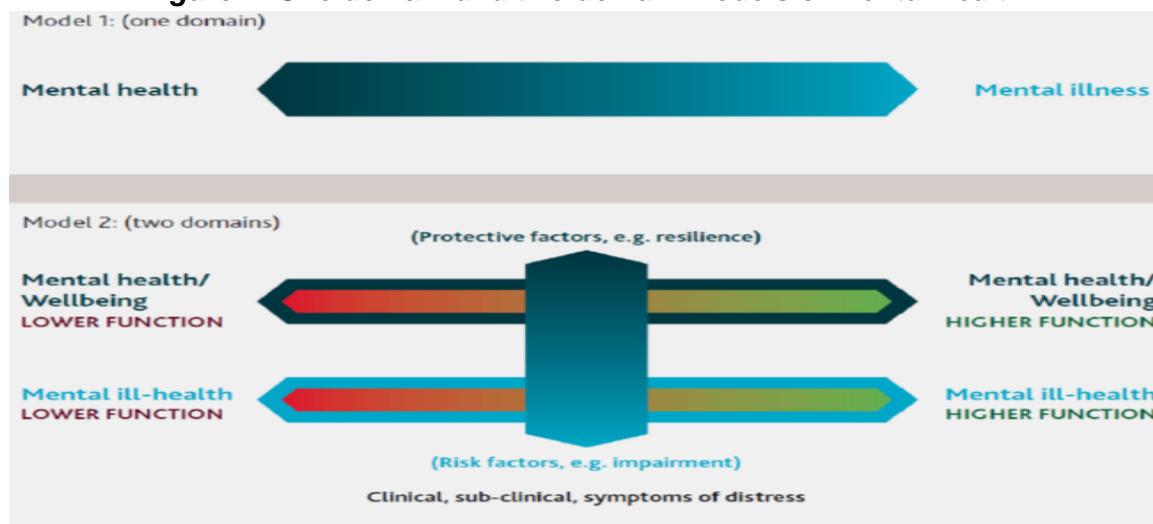
It has been well established that both physical and mental health are determined by a combination of both biological and social factors (WHO 2008; WHO 2014). The risks for developing mental disorders and poorer mental health conditions in general are greater for members of groups with less access to power, material resources and policy making as a result of broader social, political, and economic factors that sustain inequalities. Clearly, refugees and other migrant groups fall into the risk group category. The social determinants of health include material variables that are shaped by broad social and policy forces, such as access to safe environments, adequate food and housing, high quality healthcare, and appropriate employment. These material variables can have long-term and developmental effects in addition to the more obvious immediate risks (Hynie 2018). The social determinants of health also include interpersonal variables, like experiences of social exclusion, discrimination, and low

social status. Both material and interpersonal social determinants influence health and mental health through psychological states such as stress, perceptions of control and social networks, which in turn have effects through biological pathways, including neuroendocrine, neuro-immune and epigenetic responses (Bambra et al. 2009; Miller et al. 2009; Braveman & Gottlieb 2014). This entire report can be classified as a mapping of the social determinants of health in a broad sense, and with mental health in specific focus.

The role of public mental health, and not least attention to the social determinants of mental health, needs to be paramount in post-migration public health programmes, as it is the cornerstone of all public health. “Mental health is an integral part of health; indeed, there is no health without mental health.” (World Health Organization [WHO] 2016). An examination of WHO mental health principles involves a critical reorientation of national mental health policies to include and emphasise a health promotion orientation in a similar manner as that of the broader public health promotion focus:

National mental health policies should not be solely concerned with mental disorders, but should also recognise and address the broader issues which promote mental health. These include mainstreaming mental health promotion into policies and programmes in governmental and nongovernmental sectors. In addition to the health sector, it is essential to involve the education, labour, justice, transport, environment, housing, and welfare sectors as well. Promoting mental health depends mainly on intersectoral strategies (WHO 2016).

Figure 2: One domain and two domain models of mental health



Source: Adapted with permission from DeMarinis and Boyd-Macmillan 2019; and Boyd and DeMarinis 2020.

Examining the sectors to be included in this WHO (2016) national mental health policy planning statement, includes all of the sectors in this report. The interviews provide evidence for the need of intersectoral strategies in planning for successful integration of newcomers into an existing host culture and context. Post-migration policies, directives and processes, the components that comprise and to a great extent determine the success of integration strategies, are in reality programmes that need to be included under societal public mental health promotion programmes. Such

programmes need to be based on a two-domain model of mental health (see above Figure 2), where attention to mental health and wellbeing, and identified protective and risk factors, form an equally important part of societal programming for mental health as does attention to mental illness.

A public mental health promotion base at the heart of a public health paradigm for integration provides a way to reframe how policies and programmes can be oriented to maximise the range of public health initiatives in national, municipal, and local community-based components of an integration programme.

2. How can the public health promotion ADAPT model help us understand the consequences of integration programmes on the function of life systems?

The Adaptation and Development After Torture and Persecution Model (ADAPT) was developed for and with vulnerable populations, such as refugees and asylum seekers (Silove 2013). It is a public mental health promotion model that can be used simultaneously to identify important areas to address in mental-health clinical work as well as for societal programme planning for working together with such vulnerable populations in helping with the construction and reconstruction processes of post-migration challenges.

The ADAPT model organises the environmental-societal domains of every society into five core life systems: safety and security; interpersonal bonds and networks; justice; identities and roles; and existential meaning (Silove 2013). The undermining or disruption of one, a few, or all five life systems is associated with core psychosocial reaction patterns at the micro- (individual), meso- (family, group) and macro- (societal) level. Attention to assessment of function of these life systems for the host society's programme planning for integration is essential for successful integration at all three levels.

An analysis of this project's interviews with immigrants in relation to the five life systems indicates that all respondents reported some post-migration actual disruptions in or fear of disruption in several of the life systems, and in some cases all of them. The following list of interview themes emerging through a life system analysis of the interview data is by no means complete, yet it provides a snapshot of the kinds of disruptions expressed.

- **safety and security:** *chronic and recurrent threats, fear of physical harm, different forms of physical, psychological, and/or sexual abuse; experiences of disorganised, uncoordinated and/or uncaring societal systems or programmes that do not feel safe or trustworthy (in healthcare, labour market, housing);*
- **interpersonal bonds and networks:** *experiencing of negative social and spatial isolation; loss of social networks; experiences of avoidance from majority community; alienation;*
- **justice:** *experiences of discrimination due to ethnicity and/or religion; experiences of injustice related to denial of access to housing, education, employment, residency status; perception of a double standard of living for the refugee population and the majority population;*

- **identities and roles:** *threats to family values and structures; disruption of parent and child roles; disruption of husband and wife roles; experienced distress and discomfort with loss of employment status and/or loss of communication (language) ability;*
- **existential meaning:** *experiences of societal disapproval of religious beliefs and practices; loss of physical safe spaces to perform religious practices; loss of a sense of hope; experiences of a desperate need to change religious beliefs in order to improve chances for gaining permanent resident status.*

The experienced disruptions in the different life systems, and the cumulative interaction of these disruptions can be considered as very tangible risk factors (see Figure 2) leading to decreased wellbeing, increased symptoms of mental ill-health often accompanied by increased symptoms of somatic health problems. These sometimes daily-experienced risk factors make it also difficult to have the mental concentration needed for new language acquisition as well as other forms of societal learning, important factors identified in the interview data as needed for successful integration. If gone unchecked, these risk factors can spiral out of control leading to more permanent conditions of mental distress and even to mental illness (see Annex I for further information). But these negative consequences are not felt only by the individual, but also by the family, larger group and ultimately by society as a whole. The costs are with people's deteriorating health and society's spiralling social and economic costs for disintegration and the alienation of not belonging.

On the other hand, there is also evidence in the interview data identifying themes related to these life system areas that can be classified as protective factors (see Figure 2), experiences and perceptions that aided positive coping patterns, increased resilience and reduced symptoms of mental distress. These themes included not only experiences of life system function and rebuilding in relation to material social determinants such as employment/education, housing satisfaction, language acquisition progress, but just as important to interpersonal social determinants such as positive adjustments in family roles and relations; experiences of respect and support from the host population of existential meaning system and practices (religious and other expressions of these meaning systems); new friendships and relationships in network building; a sense of being understood and treated with respect by healthcare professionals; and, a sense of renewed hope for the future for oneself and one's children. Just as with the negative consequences, these positive consequences are felt not only by the individual, but also by the family, larger group and ultimately by society as a whole. In contrast to the costs of the negative, here the benefits of the positive are felt with people's improved health and society's well invested social and economic costs for dividends leading to patterns of societal integration and belonging.

3. What benefits would be gained by interpreting the conclusions and recommendations of this report on refugees' and asylum seekers' experiences of post-migration and consequences for integration in Sweden through a public mental health promotion framework?

Benefit 1: The conclusions and recommendations when viewed through a public health promotion framework can be seen as an integrated whole, providing a valuable contribution to understanding the importance of examining the interaction between the

social determinants of health for identifying and addressing long-term mental health concerns in the post-migration host context.

Benefit 2: The conclusions and recommendations in this report have emerged out of a careful analysis of the life stories contained in the interviews with the individual refugees and asylum seekers who were the respondents in this study. When examined through the public mental health promotion framework of the ADAPT model's life systems, it is possible to gain a deeper understanding of the intricate and interacting levels at and through which the life systems in these post-migration life stories change in function of the individual, family and group levels and also of society at large.

Benefit 3: The conclusions and recommendations, when analysed through this public mental health promotion framework, incorporate interactive elements of both the material-and interpersonal social determinants affecting post-migration existence and integration at individual, local, regional and societal levels. The emphasis on these interactive elements and levels and the need to gain such a perspective for moving forward is not only a recurring theme in the micro interviews but also in the meso interviews with those instructed and entrusted with implementing existing integration laws, policies and praxis.

Benefit 4: A public mental health promotion framework sets an agenda that necessarily involves diverse disciplines such as psychiatry, psychology, sociology, communications, education, and public policy working together (Campion 2017; DeMarinis 2014; DeMarinis 2018). The fruits of such interactions include developing and implementing coordinated national, regional and community-based programmes, administering services, conducting research and evaluation, and recommending policies.

9. Conclusions and Recommendations

We conclude that the areas of legal-political, socio-economic, and cultural-religious (Penninx and Garcés-Mascareñas 2016) integration are highly interconnected. Obstacles in one area may contribute to problems in the others. The lack of a required legal status may obstruct access to language classes and the labour market. Similarly, geographical isolation may lead to social isolation and take heavy tolls on psychosocial health. In Sweden, uneven distribution of resources among municipalities, a heavy focus on language acquisition and less on vocational training, as well as an overall highly individualised and secular society are among the major system dynamics that structure the problem and challenges of integration among migrants. Although refugees are motivated and eager to acquire necessary language skills and find work, distribution of migrants in isolated neighbourhoods within the municipalities and an unequal distribution of multi-level system resources are often detrimental to these efforts. Segregation in housing and distribution of accommodation is also a major factor. In the efforts to obtain “social membership” in the destination country, newcomers are met with structural obstacles that cause frustration and insecurity, starting a cycle of marginalization rather than promoting integration.

Based on the interview material, we created a dataset for the entire RESPOND project in general (see www.respondmigration.com, Forthcoming), and for the Swedish material in particular, analysing the data through cross tabulations, using SPSS software. As indicated earlier, we cannot draw any statistically significant conclusions, however, we can identify some patterns in the data. Our results showed some interesting gender differences, where women reported vulnerability in terms of being single mothers with minor children, reported serious illness concerns, reported experiencing rape and other serious forms of psychological, physical and/or sexual violence, experienced violence at the border, as well as experienced physical, psychological and/or sexual assaults. Women in general included less information on working to earn their own money, attending language classes, or attending vocational courses or training. Furthermore, women reported being more limited in choosing their place of residence and being less satisfied with the region they are currently living in. Psychological ill-health concerns were reported more frequently among women and concomitantly resilience and coping strategies were less functioning for women.

Not surprisingly, the Swedish interview data revealed that participants with a higher education were found to have had higher job skills in their country of origin, such as a specialist or an office worker. In Sweden, only the participants with a higher educational background reported that they are currently working to earn their own money. Furthermore, only those with a higher education reported that they currently have work as a specialist or office worker. The same group, contrary to those with low education, reports a stronger ability to show resilience and coping. Along the same pattern, individuals with low education report more often they suffer from psychological ill-health.

The conclusions and recommendations in this report are presented thematically as follows:

9.1. Conclusions on the Labour Market

The emphasis of integration policies of the Swedish governance model is on the rapid establishment of newcomers in the labour market as a means of ensuring their financial independence and social inclusion. The two-year long comprehensive Establishment programme, elaborated by the government, is meant to enable immigrants to integrate into the labour market. The Swedish language course, adult education and job training opportunities are among the main measures implemented. Despite this, the unemployment rate of newcomers prevails. The majority of our respondents named insufficient language proficiency as the major barrier for employment. The language deficiency was identified as especially disturbing and stressful when immigrants do not receive sufficient guidance from responsible actors about the steps to be taken in accessing job opportunities or contacting employers. Our research has also revealed insufficient coordination between the PES, the County Administrative Boards and employers, resulting in disconnectedness in preparatory courses and vacancies' requirements. Lack of attention to the individual educational capabilities in conjunction with the rigidity of the introductory course seems to slow down or rush individual progress. Together, this hinders a quick and efficient introduction into the labour market. A significant problem of the lack of job security, perceived exploitation and discrimination was observed in internship positions and short-term contracts with the immigrants referred to employers by the PES. Meanwhile, CSOs' and NGOs' activities proved to be successful in encouraging and contributing to the creation of professional network development between immigrants and employers.

In order to assess labour market integration policy it may be effective to research to what extent an emphasis on getting people into jobs quickly after arrival enforces the feeling that one must find work and makes other alternatives less favourable, hindering personal development by other means (education or cultural expressions).

9.1.1. Recommendations for the Labour Market

- The SFI curriculum should be more specific and organised with regard to professional vocabulary. Acquisition of professional vocabulary can increase employability of immigrants and consequently speed up the process of transition into the labour market. This is especially important for high-skilled immigrants struggling to acquire recognition of prior qualifications. This in turn will increase the chances to meet the Swedish labour market demand for high-skilled specialists.
- The skills-mapping technique procedure, conducted by PES, should be used more effectively. The assessment currently serves to class language proficiency but not to adjust vocational training. A benchmark approach could be useful for tracking the progress of the students and effectiveness of the programme, enabling immigrants to enter the labour market earlier and according to their study performance.
- Improvements in cooperation, elaboration of collaborative projects between PES and potential employers are necessary in order to better understand and then adjust the labour training programmes to the specific needs of the vacancies.
- Regular exchange between municipalities and counties, regarding the effectiveness of integration practices may broaden expertise, accelerate improvements and stimulate creation of similar projects with relevance to the local labour market.

- More clear instructions or more assistance for newcomers should be provided in order to navigate local institutions and understand cultural practices.
- Increased role of CSOs and NGOs in provision of training of soft skills and creating meetings, entailing interaction of immigrants and Swedes to contribute to cultural exchange and development of trust through active participation in mutual cooperation.
- Job recruitment must not require disclosure of personal information such as names, age, national identity and appearance at first instance, unless it is crucial for the job position. This measure may be undertaken in order to prevent discrimination by employers and increase the chances of the immigrants on the labour market.

9.2. Conclusions on Education

A multitude of regulations govern the access to education of immigrants with different legal statuses. The Swedish integration policies ensure access to primary and secondary school enrolment of asylum-seeking children and emphasise the importance and elaboration of vocational training programmes for adults. Acquisition of the Swedish language is a starting point in accessing educational opportunities. Nevertheless, there is a possibility of some courses being taught in the mother tongue. Although at the macro level Sweden makes a great effort to provide equal educational opportunities for immigrants and stimulate their quick integration, this report has identified a number of structural challenges reflected in performance and education outcomes.

Education performance disparity can be linked mainly to segregation; uneven distribution and socioeconomic-disparities among municipalities. The schools in remote areas or in suburbs of big cities, where immigrants are often settled, tend to have lower academic standards and resources for effective education. Smaller municipalities, with a small number of residents with migrant backgrounds, are often unable to organise programmes that would allow newcomers to develop their individual skills compared to proportionally bigger municipalities providing diverse educational programmes, which allow satisfaction for a broader range of educational interests of immigrants. Besides that, educational groups in small municipalities tend to be interrupted by the intake of newly arrived immigrants (“rolling intake”) since the municipalities often launch just one group considering the number of students. Newly admitted immigrants either start from the beginning or are forced to catch up with the topics already covered by themselves and this makes the quality of the education unequal and disrupted. It is especially challenging in mixed groups when age and educational backgrounds of all students are different. Furthermore, immigrants in small municipalities with a high number of newcomers are often placed in schools together with a high number of immigrants, slowing down the Swedish language acquisition process due to lack of social interaction with native speakers. At the same time, in cities with a high proportion of immigrants a shortage of language teaching professionals was observed. Therefore, although free language classes are widely available across Sweden, the organization of language learning remains the most important barrier for labour market integration and overall establishment of newcomers. Additionally, the education and work skills acquisition of some population groups among immigrants such as people with special physical needs and people on parental leave may require additional effort and time.

Among other difficulties, remoteness of educational facilities from places of residence was mentioned as significant, requiring long-distance journeys and complicated scheduling of work or education activities.

9.2.1 Recommendations on Education

- Adjust language classes to more situation-oriented vocabulary enabling immigrants to use their knowledge in regular life events.
- Adult education groups need to be formed with respect for generational characteristics, considering the needs and learning capacities of people of different ages.
- The Establishment programme's timeframe should be reconsidered regarding people in certain circumstances, such as people with special physical needs, health issues and people on parental leave, altering their opportunities to accomplish the programme in time.
- Provision and distribution of information about educational opportunities and rights need to be improved.
- Infrastructural improvements are necessary in smaller municipalities and remote areas for ensuring access to schools and adequate time management.
- Common and regular activities organised in municipalities between locals and immigrants may contribute to faster acquisition of the Swedish language and develop a more integrated community.

9.3. Conclusions on Housing and Spatial Integration

The Swedish governance of the settlement of immigrants consists of the provision of two housing alternatives - Municipal responsibility is direct for EBO dwellers, but for ABO the SMA administers and proposes a municipality. Prevalence of EBO and consequent increase in the population of a few municipalities has resulted in amendments in the Settlement Act for equalizing the distribution of immigrants among municipalities. ABO, provided by SMA, is criticised for poor space management resulting in extremely congested living conditions when 3-4 family members live in one room. Upon receiving a decision on permanent or temporary residency, it is the responsibility of municipalities to assist immigrants with finding a place to live.

The general housing crisis in Sweden considerably complicates the opportunity to find an apartment for everyone residing in the country. However, it puts an additional burden on immigrants with refugee background struggling with establishing their lives in other spheres at the same time. The concatenation and inconsistency between the housing crisis and the labour market is prominent in the Urban-Rural divide when higher labour market demand in big cities produces fewer housing offers, whereas greater opportunities in finding housing in rural areas are associated with fewer available jobs, little access to infrastructural benefits and establishment of resources. The interview material also revealed that most newcomers prefer living in cities for integration purposes. The vulnerability of unaccompanied minors reaching the age of adulthood and therefore cease being entitled to financial and accommodation provisions persists, aggravated by the lack of life experience and family support. A

strong link between stable housing and psychological comfort was established in the research.

The majority of our respondents referred to life in rural areas as difficult, mainly in terms of infrastructure. While some are indifferent about the place of residence prioritizing having a job, the majority, however, tend to prefer life in cities. Geographical division within municipalities and spatial segregations between Swedes and immigrants as much as between different national groups of immigrants were observed. Many respondents express the need of belonging to a community in the neighbourhood and equally aspiring for interaction with neighbouring Swedes and other immigrants. The issue of temporary housing contracts in the settlement process creates a constant feeling of uncertainty and hinders long-term attachment to critical activities – language learning, child care, access to education, work, the opportunity to be engaged in the broader community and ultimately affects integration into Swedish society.

9.3.1. Recommendations on Housing and Spatial Integration

- Housing and development policies in Sweden should be reconsidered and improved in light of the significantly increased number of inhabitants in Sweden.
- Infrastructure in small municipalities and remote areas could be improved out of consideration for the emerging activities with the arrival of immigrants.
- Provide immigrants with adequate assistance and support in their search for housing.
- Support unaccompanied minors with prolonged assistance during and after their transition to the age of adulthood.
- Community building and neighbourhood activities to bridge together Swedes and newcomers may help to establish networks and tackle discrimination and segregation issues.

9.4. Conclusions on Psychosocial Health

General health in relation to specific subgroups can be highlighted. One group among newly arrived immigrants facing special challenges is those with special physical needs. The challenges, as identified by the counties and NGOs, link to the lack of information to be well prepared and the need for special medical treatment, is not always available. We also see gender differences in general health, not least where women express more challenges. While women would express relatively easy access to health services, when it comes to mental health counselling, they would avoid that, mainly for reasons of confidence or lack of trust towards strangers. Other women would avoid psychiatric counselling, fearing they will lose custody of their children. A specific group, newly arrived children, express the lack of communication and transformation of the health record in the municipality and county council levels, leading to negative consequences. Some newly arrived children narrate they got the vaccinations and health examinations several times, while others did not get any at all. Yet another group, individuals who turn 18 and get rejections, find themselves in a difficult situation, being cut off from health services, especially difficult for those in need of psychological counselling.

An individual's psychosocial health is not separate from his/her meaning making system, specifically so the existential meaning dimension. Thus, the interviews have

revealed the following information relevant for the meaning making systems: **Religion** is a central meaning making system among a majority of respondents, both through specific rituals and practices and through beliefs, values and attitudes. Some individuals feel the lack of religious places where they can pass on their practices to their children. In their view, society is not providing possibilities for religious practices equally to all citizens. **Children** are often and strongly linked to meaning giving as well, where they are a source of strength. **Family** is also described in relation to coping function, helping handle difficulties in life. Some respondents feel that family and significant others can have a positive or a negative impact in life depending on the situation, while others feel the notion of family being a positive or negative source depending on whether they are able to help them in the time of need. Besides, certain expectations by the family can for some participants create a remarkable pressure, impacting their lives in the host society. The role of the individual in the family also changes from pre- to post-migration, having an effect on gender roles. **Work** has been described as a central and important dimension in life, linked to participants' self-image, in terms of being ambitious and successful. **Self-fulfilment**, in terms of goals in life, respect, pride, and gender equality, is also a meaning-giving factor.

9.4.1. Recommendations on Psychosocial Health

- Enhancing the competence of practitioners in cultural meaning making systems, including religious faith and practices, and their often positive health function, is an important knowledge in policy planning and in encounter with newcomers.
- Give more importance to training of culturally sensitive and healthcare competent interpreters that can mediate more trustful interaction between health practitioners and people with immigrant background.
- Paying specific attention to women's health concerns, together with other central systems, such as family, children and gender roles, is important in the framework of integration.
- Provide individuals in vulnerable situations with practical resources for coping that are functional and culturally sensitive in the framework of general health.
- Distribute information about rights and encourage vulnerable groups (undocumented migrants) to express their rights in order to reduce fears in accessing the healthcare services.
- Improve the system of tracking the health records of newly arrived immigrants who have moved several times before settling down in order to avoid significant health damage.

9.5. Conclusions on Citizenship and Belonging

Once one of the most generous countries in terms of migration among the Nordic and EU Member states, Sweden has adopted more and more restrictive policies affecting the access to rights. Restrictive access to rights, especially the right of permanency in the host country, is a major hurdle for integration, as it restricts the capacity of participation in society and contributes to both individual, family and group experiences of psychosocial ill health. As in many European countries, Sweden is struggling with long processing times of asylum claims and citizenship applications. However, at least

among the Nordic states, Sweden still has the least complicated set of rules for naturalisation, which is the most common way for newcomers to acquire citizenship. Naturalisation requires that one has to live in Sweden as a permanent resident for 4-5 years and be able to prove her or his identity. With recent policy changes it has become more difficult for newcomers to meet these requirements for citizenship, especially identity verification and permanent residency.

First, this report found that proof of identification documentation is a major obstacle especially for certain defacto disadvantaged groups. The Swedish Migration Agency which grants citizenship, considers for example that the Afghan identification documents do not prove the identity of the holder to the extent required for a proven identity in matters of Swedish citizenship. On the other side, some other groups of beneficiaries of international protection are privileged as stateless persons and children with permanent residence permits and may have an easier time obtaining citizenship. For example, stateless persons and residents with permanent residency permits and refugee statuses can be granted citizenship by the end of their four years residence in Sweden.

Second, it has generally become much harder for newcomers to obtain a permanent residence permit, since the adoption of the 2016 Temporary Act. Nowadays, mostly temporary permits are granted. Such do not grant the same access to rights and duties as permanent residency permits do. In this sense, the restricted access to a permanent legal status in Sweden is not only limiting the possibility to obtain citizenship but is also infringing on access to rights.

Citizenship has recently been linked to demonstrating societal orientation and belonging in the Swedish society, following a proposal to adopt a society orientation test in the naturalisation procedure. From early 2019, classes for newcomers on Swedish society, rights, duties, possibilities and norms and values, such as equality and children's rights are provided from day one of their arrival. As interviews with newcomers reveal however, courses and programmes are not always effective in inducing a feeling of belonging. Naturally, learning about the host culture and its ways of living are essential to the integration process. However, integration, as explicitly expressed by many of the interviewed, is also dependent on perceiving and experiencing mutual respect. The process of citizenship acquisition and naturalisation cannot start without a permanent residence permit. This requirement has become the hardest to meet, particularly for the beneficiaries of international protection since 2016.

The interviews with newcomers in this report, have revealed that legal status, especially uncertainty about one's legal status, has an important impact on all areas of integration as well as overall psychosocial health and wellbeing. Regardless of the type of residence permit, newcomers have felt a certain stigma attached to their citizenship (Syrian, Afghani or Iraqi). Combined with the lack of benefits associated with Swedish or EU citizenship, newcomers often felt very limited, some "trapped" or "restricted in their freedom". Few respondents explicitly expressed the desire to acquire Swedish citizenship. This may be linked to a general uncertainty about the future. The interviews suggest however, that there is generally limited knowledge about one's actual rights and access to legal aid (or access to identification documents among Afghan asylum seekers). Another possible factor may be that newcomers have not spent enough time in the host country to be eligible for citizenship (4-5 years) nor to develop a feeling of belonging and a subsequent desire to obtain citizenship.

Social isolation, due to geographical location or cultural dissonance, is a major factor infringing on a feeling of belonging. We have observed that most interviewees come from group-oriented societies, and thus have a strong motivation to engage socially in the host community. This is met with cultural barriers, most likely due in part to the perceived individual-oriented nature of Swedish society. After a certain period of time, for residents with a permanent residence status, forming relations may become easier. However, some respondents still perceive new relations with Swedes as shallow and tinted with an underlying mistrust, primarily linked to their religion and/or nationality. As a result of perceived discrimination due to religion, some respondents even considered converting to Christianity. However, most have a strong emotional and cultural attachment to their religion, which also serves as the main source for their existential meaning making process and which shapes their values and principles. Thus, respect for religious values and practices are mentioned as crucial for their ability to establish themselves in the host country. Having to compromise religion or religiosity in exchange for Swedish secular values would be a major sacrifice, which for many is a price too high to pay in exchange for “belonging”. Perceived stigmatization may have an impact as limiting one's actions, draining initiative, and reducing a sense of freedom.

Some Swedish secular values, namely regarding gender equality and perceived freedom of sexuality, provided some grounds for tensions with prior value systems. Notably the normality of homosexuality in Sweden provoked various reactions among responders, some perceiving it as “wrong” and others adjusting positively to a new relation to sexuality. Gender equality and freedom in the upbringing of children in Sweden was perceived by some quite positively, especially by women.

Confronted with new value systems and forms of social interaction, some respondents mentioned their engagement in civil society groups, such as community projects and language cafes that created a welcoming atmosphere and a chance to connect. Participation in associations linked to the culture of origin provided a space for cultural expression, for building or maintaining relationships and contributed to overall psychosocial health.

9.5.1. Recommendations on Citizenship and Belonging

- Terminate the Temporary Act that restricts access to permanent residence permits and to basic rights, and by extension contributes to uncertainty about the future, which thereby increases psychosocial ill-health for individuals, families and groups.
- Legislative reforms to enable the beneficiaries of international protection to access permanent residency and eventually Swedish citizenship. This could occur with a limitation in a similar way to when legal changes were made after the extension of the Temporary Act. This approach allowed specific groups of those beneficiaries to be reunited with family members under certain more lenient and friendlier conditions.
- The Swedish Migration Agency needs to be more transparent regarding the requirements for citizenship especially regarding identity. There needs to be a deeper understanding and process for developing guidelines for the identification of applicants who have difficulty proving their identity due to a deficient documentation system in the country of origin.

- Improve access to information regarding legal rights, access to legal advice for asylum seekers and collaborating with municipalities and NGOs in order to make this information available as soon as possible.
- Standards in the Swedish labour market collective agreements provide great protection for the Swedish labour force. Nevertheless, they should not create hindrances for those with a permanent residence permit nor for citizenship acquisition by the beneficiaries of international protection who are permanently living in Sweden since 2016. This indicates the need to reconsider more lenient requirements for newcomers since 2016.
- Encourage, fund, promote and give incentives for multicultural neighbourhoods to allow for “natural interaction” with established Swedes and to improve social orientation and feelings of belonging.
- Avoid assigning accommodation in segregated or geographically-isolated areas, in order to avoid social isolation and lack of access to the infrastructures essential for the integration process.
- Among practitioners highlight the perspective of societal integration that includes mutual respect in dimensions related to existential meaning systems.

Appendices

Table 6. Demographics, by frequency and percentage

Country of origin		
Syria	44	72%
Afghanistan	15	25%
Iraq	2	3%
Total	61	100%
Time of arrival in Sweden		
Early arrivals (2011-2014)	15	25%
Late arrivals (2015-2018)	40	65%
Missing	6	10%
Gender		
Man	32	52%
Woman	29	48%
Age groups (age range 18-84, Med=35)		
18-26	10	16%
27-50	45	74%
51+	6	10%
Civil status at the time of interview		
Married	31	51%
Divorced	8	13%
Engaged	3	5%
Widowed	2	3%
Single	17	28%
Ethnic groups		
Arab	28	53%
Hazara	11	21%
Assyrian	4	7%
Kurd	3	5%
Tajik	2	4%
Uzbek	5	9%
Religious adherence		
Muslim	45	75%
Christian	6	10%
Converted to Christianity	4	7%
Druze	2	3%
Atheist/non-religious/other	3	5%
Educational level		
Illiterate	5	8%
Elementary school	5	8%
Lower secondary	4	7%
Higher secondary, tertiary (e.g., university degree)	41	67%
Not applicable/No response	6	10%
Number of children		
0	4	7%
1 - 3	26	43%
4 - 6	8	13%
7 - 9	2	3%
Not applicable/No response	21	34%
Childcare support received		
No	4	7%
Yes	14	23%
Not applicable/No response	43	70%
Family situation		

Living with family	35	63%
Living alone	17	30%
Single mother	4	7%
Vulnerability (multiple choice)		
Elderly	2	3%
Pregnancy (during the migration journey)	1	2%
Single parent with minor children	5	8%
Serious illness	6	10%
Torture	4	7%
Rape and other serious forms of psychological, physical or sexual violence	5	8%
Don't know/Not applicable	44	72%

Table 7. Border experience, by frequency and percentage

Sea rescue		
No	28	46%
Yes	19	31%
Not applicable/No response	14	23%
Violence experienced at the border		
No	40	66%
Yes	3	5%
Not applicable/No response	18	29%

Table 8. Reception experience, by frequency and percentage

General experience with reception administrators		
Rather/not supportive	17	28%
Rather/supportive	44	72%
Not applicable/No response	0	0%
General experience with NGOs		
Rather/not supportive at all	4	7%
Rather/supportive	21	34%
Not applicable/No response	36	59%
Experienced physical or psychological assaults		
No	18	30%
Yes	9	15%
Not applicable/No response	34	55%

Table 9: The submitted and determined citizenship cases pursuant to paragraph 12 of the Administrative Act

	2018			2019		
	Women	Men	Total	Women	Men	Total
The total submitted citizenship Cases	3.126	5.506	8.632	14.293	23.746	38.039
The total determined citizenship cases	2.984	5.269	8.253	14.010	23.181	37.191

Source: (SMA 2019 c, p. 111)

Table 10: The submitted citizenship cases 2016-2019

	2016			2017			2018			2019		
	Women	Men	Total									
The Total submitted Cases	31.721	32.353	64.074	35.779	39.186	74.965	40.701	49.426	90.127	39.935	51.563	91.498
Of which were naturalisation cases	21.475	21.157	42.632	24.664	26.286	50.950	26.635	32.234	58.869	31.547	41.528	73.047
Of which were notification cases	9.566	10.497	20.063	10.346	12.183	22.529	13.285	16.367	29.652	7.425	9.019	16.444
Of which Determined retention/release cases	620	651	1.271	672	627	1.299	649	677	1.326	740	783	1.520
Of which citizenship declaration	60	48	108	97	90	187	132	148	280	223	233	456

Source compilation from: (SMA 2019 c, p. 111) (SMA 2018 a, p. 112)

Table 11: The handled citizenship cases 2016-2019

	2016			2017			2018			2019		
	Women	Men	Total									
The total handled naturalisation cases	18.768	17.064	35.832	22.310	21.507	43.817	19,850	21,560	41.410	20.749	27.922	48.671
The percentage of approved cases	89%	81%	86%	90%	83%	87%	90%	85%	87%	89%	84%	86%
Average handling time	239	274	256	241	264	252	278	311	295	334	353	345
Determined notification cases	9.427	10.352	19.779	9.320	10.843	20.163	8.251	9.842	18.093	11.807	14.417	26.228
The percentage of approved cases	81%	80%	81%	83%	82%	83%	84%	82%	83%	86%	85%	85%
Average handling time	40	39	39	49	49	49	96	96	96	184	186	185
Determined retention/Release cases	581	604	1.185	704	677	1.381	596	619	1.215	525	542	1.067
The percentage of approved cases	57%	56%	56%	63%	55%	59%	57%	53%	55%	53%	53%	53%
Average handling time	44	43	43	42	44	43	36	36	36	90	83	86
Determined citizenship declaration	50	33	83	84	71	155	136	166	302	124	146	270
The percentage of approved cases	54%	64%	58%	44%	62%	52%	68%	60%	64%	65%	60%	62%
Average handling time	76	72	74	81	106	92	85	97	92	114	112	113
Total	28.826	28.053	56.879	32.418	33.098	65.516	28.833	32.187	61.020	33.205	43.027	76.232

Source compilation from: (SMA 2019 c, p. 110) (SMA 2018 a, p. 114)

Table 12: The number of granted citizenships for the top five nationalities 2018-2019

Nationality	The total number of the granted citizenship during 2018	Nationality	The total number of the granted citizenship during 2019
Syria	11.362	Syria	29.173
Somalia	7.070	UK	4.577
Stateless	6.425	Afghanistan	4.150
Iraq	2.588	Somalia	3.711
Afghanistan	2.133	Stateless	3.515

Source: (SMA 2020 f)

Table 13: Naturalisation of beneficiaries of international protection 2011/2019

Granted citizenship cases through Naturalisation	2011	2012	2013	2014	2015
Granted citizenship cases for subsidiary protection status beneficiary	13	29	204	330	473
Granted citizenship cases for family members of a person with granted residence permit on the international protection grounds	18	83	275	1.325	1.581
Granted citizenship cases for refugees	12	122	375	763	872
Granted citizenship cases through Naturalisation	2016	2017	2018	2019	
Granted citizenship cases for subsidiary protection status beneficiary	894	4.130	6.094	11.038	
Granted citizenship cases for family members of a person with granted residence permit on the international protection grounds	1.166	1.542	2.034	1.936	
Granted citizenship cases for refugees	1.205	1.993	3.199	4.976	

Source: SMA, E-mail correspondence, 24 May 2020

Table 14: Naturalisation requirements in the Nordic countries, Germany and France

	Sweden	Norway	Denmark	Iceland	Finland	Germany	France
Identity Documentation	Yes	Yes	No	Yes	Yes	Yes	Yes
Residence	5 years	7 years	9 years	7 years	5-7 years	8 years	5 years
Language Skills	No	A2	B2	A1	B1	B1	B1
Citizenship Test	No	Yes	Yes	No	No	Yes	Yes
Self-Support	No	Yes	Yes	No	No	Yes	Yes
No debt to the state	Yes	No	Yes	Yes	Yes	Yes	Not found
Conduct (max. waiting time for a criminal act)	7 years	34.5 years	Permanent Exclusion	14 Years	7 years	Permanent Exclusion	Not more than 6 months in Prison
Citizenship Ceremony	Voluntary	Voluntary	Voluntary	No	No	No	Yes
Oath of Allegiance	No	Yes	Mandatory	No	No	No	Voluntary

Source compilation from: (Midtbøen, A et. al 2017 p. 40), (Service-Public.fr 2020) (Ministry of interior 2020)

Table 15: The number of beneficiaries of international protection who managed to change their residence permits from temporary to permanent from January 2017-March 2020.

	2017			2018			2019			2020		
	Women	Men	Total									
Article 17-para 2TA ²⁴	7	38	45	11	93	104	35	319	354	40	369	409
Article 17-para 3TA ²⁵					1	1	1	12	13	4	20	24

Source: SMA, E-mail correspondence, 1 April 2020

Table 16. Number of Permanent and Temporary Residence Permits granted to Beneficiaries of international protection from July 2016 to December 2019

	2016			2017			2018			2019		
	Perma-nent permit	Tempo-rary permit	Total	Perma-nent permit	Tempo-rary permit	Total	Perma-nent permit	Tempo-rary permit	Total	Perma-nent permit	Tempo-rary permit	Total
Subsidiary protection (Cha4, para 2 SAA)	19.397	16.195	35.592	6.254	7.524	13.778	1.028	3.902	4.930	96	2.592	2.688
The Convention commitment (11 art TL)	1	40	41	3	101	104	6	119	125	7	120	127
Convention refugees (Cha4, para 1 SAA)	5.805	5.271	11.076	5.752	9.614	15.366		4.904	4.904		4.495	4.495
Upper Secondary School Education Act					160	160	1.531	6.531	8.062	463	4.698	5.161
Quota refugee	584		584	4.826	20	4.846	5.205	12	5217	5.235	18	5.253
Special distressing circumstances (Cha5, 6 SAA) (18 art TL)	971	42	1.013	885	206	1.091	245	274	519	116	186	302
Temporary protection		319	319	2	612	614	1	471	472		409	409

²⁴ The second paragraph in article 17 in the TA covers those beneficiaries of international protection whose temporary residence permits was granted on protection related grounds (5 Article), on the ground of Sweden's international commitments (Article 12), on the ground of hindrances to expulsion (Articles 15-16), on the ground of the extension of the study residence permit (Articles 16a-16b), on the ground of the upper secondary school level residence permit (Articles 16c-16i), and on the ground of a residence permit after completing upper secondary school education (Article 16 i).

²⁵ According to the third paragraph in Article 17 in the TA a permanent residence permit can be granted for those foreigners who have not reached the age of 25 only if he or she has completed a (a) upper secondary education or the equivalent; (b) vocational training aimed at facilitating establishment in the labour market and provided under an introductory programme in the upper secondary school; or (c) cohesive vocational training in the municipal adult education or the special education for adults.

Execution hindrances	6	201	207	6	510	516		691	691	4	745	749
A person otherwise in need of protection (Cha 4, para 2A)	62	2	64	31	6	37	1	7	8		17	17
Total	26.826	22.070	48.896	17.763	18.768	36.531	8.017	16.913	24.930	5.921	13.280	19.201

Source: SMA, E-mail correspondence, 1 April 2020

Table 17. Micro level interview references and status

No.	References	Status
1	Syrian man, Age group 50+, No.1	Permanent residence permit
2	Syrian woman, Age group 27-50, No.2	Permanent residence permit
3	Syrian man, Age group 27-50, No.3	Permanent residence permit
4	Syrian man, Age group 27-50, No.4	Permanent residence permit
5	Syrian woman, Age group 27-50, No.5	Permanent residence permit
6	Syrian man, Age group 27-50, No.6	Permanent residence permit
7	Syrian man, Age group 27-50, No.7	Temporary residence permit
8	Syrian woman, Age group 27-50, No.8	Family reunification
9	Syrian man, Age group 27-50, No.9	Permanent residence permit
10	Syrian woman, Age group 27-50, No.10	Temporary residence permit
11	Syrian man, Age group 27-50, No.11	Asylum seeker in deportation stage
12	Syrian woman, Age group 27-50, No.12	Permanent residence permit
13	Syrian woman, Age group 27-50, No.13	Permanent residence permit
14	Syrian man, Age group 27-50, No.14	Temporary residence permit
15	Syrian man, Age group 27-50, No.15	Permanent residence permit
16	Syrian man, Age group 27-50, No.16	Temporary residence permit
17	Syrian man, Age group 18-26, No.17	Temporary residence permit
18	Syrian woman, Age group 27-50, No.18	Temporary residence permit
19	Syrian man, Age group 50+, No.19	Permanent residence permit
20	Syrian man, Age group 27-50, No.20	Permanent residence permit
21	Syrian woman, Age group 27-50, No.21	Permanent residence permit
22	Syrian man, Age group 18-26, No.22	Family reunification
23	Syrian woman, Age group 27-50, No.23	Asylum seeker
24	Syrian woman, Age group 27-50, No.24	Permanent residence permit
25	Syrian woman, Age group 27-50, No.25	Permanent residence permit
26	Syrian woman, Age group 27-50, No.26	Family reunification
27	Syrian man, Age group 27-50, No.27	Permanent residence permit
28	Syrian woman, Age group 50+, No.28	Permanent residence permit
29	Syrian woman, Age group 27-50, No.29	Permanent residence permit
30	Syrian woman, Age group 27-50, No.30	Permanent residence permit
31	Syrian woman, Age group 18-26, No.31	Permanent residence permit
32	Syrian woman, Age group 27-50, No.32	Permanent residence permit
33	Syrian woman, Age group 27-50, No.33	Permanent residence permit
34	Syrian man, Age group 27-50, No.34	Permanent residence permit
35	Syrian woman, Age group 27-50, No.35	Permanent residence permit
36	Syrian man, Age group 27-50, No.36	Permanent residence permit
37	Syrian woman, Age group 27-50, No.37	Permanent residence permit
38	Syrian man, Age group 27-50, No.38	Temporary residence permit
39	Syrian man, Age group 27-50, No.39	Permanent residence permit
40	Syrian man, Age group 27-50, No.40	Permanent residence permit
41	Syrian man, Age group 50+, No.41	Asylum seeker
42	Syrian man, Age group 27-50, No.42	Permanent residence permit
43	Syrian man, Age group 27-50, No.43	Temporary residence permit
44	Syrian man, Age group 27-50, No.44	Permanent residence permit
45	Iraqi man, Age group 50+, No.45	Asylum seeker
46	Iraqi woman, Age group 27-50, No.46	Permanent residence permit

47	Afghan man, Age group 18-26, No.47	Temporary residence permit under the Upper Secondary Education Act
48	Afghan man, Age group 18-26, No.48	Asylum seeker
49	Afghan man, Age group 18-26, No.49	Asylum seeker
50	Afghan man, Age group 27-50, No.50	Asylum seeker
51	Afghan man, Age group 18-26, No.51	Asylum seeker
52	Afghan woman, Age group 27-50, No.52	Asylum seeker in deportation stage
53	Afghan woman, Age group 27-50, No.53	Asylum seeker
54	Afghan woman, Age group 27-50, No.54	Asylum seeker in deportation stage
55	Afghan woman, Age group 18-26, No.55	Asylum seeker in deportation stage
56	Afghan woman, Age group 27-50, No.56	Asylum seeker in deportation stage
57	Afghan woman, Age group 18-26, No.57	Asylum seeker in deportation stage
58	Afghan woman, Age group 27-50, No.58	Asylum seeker
59	Afghan man, Age group 18-26, No.59	Temporary residence permit under the Upper Secondary Education Act
60	Afghan man, Age group 50+, No.60	Temporary residence permit
61	Afghan man, Age group 27-50, No.61	Permanent residence permit

Table 18. Meso level interview references with institution and role of stakeholders

No.	References	Institution	Role
1	SE_Meso_Interview_No1	Swedish Migration Agency (SMA)	Civil servant
2	SE_Meso_Interview_No2	District Administration	Administrator
3	SE_Meso_Interview_No3	Uppsala Municipality	Labour Market Officer
4	SE_Meso_Interview_No4	Medical Service for Refugees	Nurse
5	SE_Meso_Interview_No5	Stockholm Intensive Swedish for Academics	Teacher
6	SE_Meso_Interview_No6	County Administrative Board (Länsstyrelsen)	Civil servant
7	SE_Meso_Interview_No7	The Establishment Lift (Etableringslyftet)	Coach/language supporter
8	SE_Meso_Interview_No8	Södertälje Municipality	Chair of the Municipal Council
9	SE_Meso_Interview_No9	Flyktingmedicin (Refugee Medical)	Nurse
10	SE_Meso_Interview_No10	Swedish Migration Agency	Civil servant
11	SE_Meso_Interview_No11	Swedish Migration Agency	Civil servant
12	SE_Meso_Interview_No12	Swedish Public Employment Service (Arbetsförmedlingen)	Civil servant
13	SE_Meso_Interview_No13	Religious Congregation	Priest
14	SE_Meso_Interview_No14	Transcultural Center	Director
15	SE_Meso_Interview_No15	Project Mig-HealthCare	Nurse
16	SE_Meso_Interview_No16	Project Mig-HealthCare	Dentist
17	SE_Meso_Interview_No17	Religious congregation	Priest
18	SE_Meso_Interview_No18	NGO	Representative
19	SE_Meso_Interview_No19	N/A	Lawyer

Annex I: A brief guide to the life systems of the ADAPT model by Silove, 2013.

Five ecosocial life systems of potential psychosocial wellbeing or lowered mental health functioning

The ADAPT model organises the ecosocial environmental-societal domains of every society into five core life systems that support safety and security; interpersonal bonds and networks; justice; identities and roles; and existential meaning (Silove 2013). The undermining or disruption of one, a few, or all five life systems is associated with core psychosocial reaction patterns at the micro (individual), meso (family, group) and macro (societal) ecosocial levels (Bronfenbrenner's model 1979). These psychosocial reactions can be organised according to the impact on the life systems:

- Chronic or recurrent threats to safety and security (Life system 1) generate fear and anxiety, and when the threat extends beyond the individual's capacity to adapt, manifests in overt symptoms of PTSD and other forms of clinical anxiety (Tay et al. 2015b).
- Multiple adversities, traumatic losses and separations (Life system 2) lead to grief and when unmitigated, result in complicated forms of bereavement and extreme separation anxiety which in turn affect ongoing relationships (Silove et al. 2010; Tay et al. 2016c).
- Exposure to gross human rights violations (torture, sexual abuse, massacres) often provokes an intense sense of injustice (Life system 3) associated with normative feelings of anger, a response that can become dysfunctional when anger expresses itself in inappropriate aggression (Rees & Silove 2011; Silove et al. 2017; Tay et al. 2015c).
- Loss of roles and identities (Life system 4) can challenge the sense of identity and at the extreme, lead to feelings of marginalization and anomie (Tay et al. 2019b).
- Disruption of systems of meaning in the social, cultural, political, spiritual and religious domains (Life system 5) challenges the individual to re-evaluate established belief systems which in turn can lead to a sense of incoherence and existential despair (Başoğlu et al. 2005).

Source: Adapted and printed by permission of authors (Boyd-MacMillan & DeMarinis, 2020)

Annex II: Common codebook for integration

Micro level

Labour market	
Access to labour market after decision	Preparatory measures for labour market inclusion (e.g. Specific language classes, internships etc.)
Employment (Work of refugees/irregular migrants after decision)	<ul style="list-style-type: none"> • Employment experience • The way how the job was found • Legal status of work and reason • Satisfaction of work, • Job plans for future • Change of employment
Qualifications	<ul style="list-style-type: none"> • Prior experience • Qualifications • Over-qualifications, over-skills • Increase of skills and qualifications
Facilitators	<ul style="list-style-type: none"> • Local (source country) community • Special programmes • Other people • Role of governmental initiatives • Role of non-governmental initiatives or programme
Challenges and barriers	<ul style="list-style-type: none"> • Language • Culture • Exploitation • Discrimination • Exclusion • Gender
Education	
Access to education (options and problems in accessing education or during education)	<ul style="list-style-type: none"> • For adults • For children
Recognition of educational qualifications	
Attitude towards education	<ul style="list-style-type: none"> • Recognition of educational qualifications • Willingness to continue education • Willingness to register for studies/ a vocational school • Willingness to attend vocational courses (also courses of language other than the host country language)
Host country language learning	<ul style="list-style-type: none"> • Host country language knowledge before arriving • Host country language knowledge level • Willingness to learn/to continue learning host country language • Incentives to learn host country language • Funding (funded by the government, funded by NGO, funded by religious institution, own funding)
Good practices in education	<ul style="list-style-type: none"> • In adults' education • In children education
Educational challenges	<ul style="list-style-type: none"> • In adults' education • In children education
Place of residence (PoR)	
Preferences PoR	
Choice PoR	

Dis/advantages PoR	
Housing	
Living situation	
Housing arrangement	
Stability of housing situation	
Satisfaction with existing housing	<ul style="list-style-type: none"> • Positive remarks • Negative remarks • In relation to previous housing/facility? • Fears
Problems in housing	
Feeling at home	<ul style="list-style-type: none"> • Bought my own furniture • Decorated to remind me of my home in home-country • Considered redecorating but lacks fund
Public psychosocial health	
Psychosocial health condition	<ul style="list-style-type: none"> • Current somatic health (positive/negative) • Earlier (retrospectively) somatic health (positive/negative) • Current mental health (positive/negative) • Earlier (retrospectively) mental health (positive/negative)
Access to medical health	<ul style="list-style-type: none"> • Access to health care • Language barriers and ways to overcome it • Discrimination in access to health care • Good practices in access to health care
Religious and cultural resources	<ul style="list-style-type: none"> • Positive • Negative
Existential system that provides meaning and hope	<ul style="list-style-type: none"> • Description of religious or other existential meaning system now (destination country) – constructive/destructive • Changes of meaning-system from pre-migration (home country) – constructive/destructive • Changes of meaning-system during transit experience – constructive/destructive
Examples of coping strategies	<ul style="list-style-type: none"> • Self – constructive/destructive • Spouse/partner – constructive/destructive • Children – constructive/destructive • Others in neighbourhood – constructive/destructive • With Swedish (national context) healthcare situations – constructive/destructive • Other national authorities – constructive/destructive
Experiences of family and significant others in daily living	<ul style="list-style-type: none"> • Family/significant other roles in pre-migration • Family/significant other roles in transit • Family/significant other roles in current situation
Citizenship	
Political participation	<ul style="list-style-type: none"> • Source country • Destination country
Following the news	<ul style="list-style-type: none"> • In host country • In home country
Citizenship	<ul style="list-style-type: none"> • Status • Knowledge

	<ul style="list-style-type: none"> • Desire
Community involvement	
Neighbours	<ul style="list-style-type: none"> • Ties • Treatment
Integration understanding	
Visiting the home country	
Return wishes/plans	
Gender	
Opportunities and Access (to services, education, labour market, etc.)	
Social Relations	
Social Change	<ul style="list-style-type: none"> • Marriage, divorce, early marriage, forced marriage • Family duties • Children • Sexuality • Religion • Politics
Pressures, stresses, difficulties	
Empowerment, women-related activities, networking	

Meso level

WP5 – INTEGRATION	
Dominant understanding of integration - identified by the interviewees	<ul style="list-style-type: none"> • How is this expressed in political/public/media spheres? • Assimilation, integration, separation • Change • Other
Barriers and challenges to social acceptance / integration - Identified by the interviewees	Issues related to cultural background, religious practices, gender norms, or other Discrimination
Key actors involved	<ul style="list-style-type: none"> • State actors local/regional/national governments, state institutions, ministries etc. • Non-state actors and faith-based NGOs • Grassroots and solidarity movements
Citizenship & Belonging	
Political participation	Includes migrant involvement, or ambitions to involve, in any kind of decision making (i. e. regarding living conditions, labour, education)
Citizenship	Information about citizenship policy and citizenship acquisition in practice
Rights	Information about access to rights of migrants.
Community involvement / community relations	This can relate to integration broadly understood or to direct Involvement in local level community gatherings
Transnational ties	<ul style="list-style-type: none"> • Political ties (Involvement in homeland politics (current or former political activists) • Economic ties (supporting/ involving economic-business relations between home and receiving country • Cultural ties (belonging & ideas about return migration)
GENDER	

Opportunities	Gender specific access or lack of access to health services; education; the labour market; awareness about discrimination
Social Relations / Social Change	<ul style="list-style-type: none"> • Perception that migration has affected the following for women or men: • Marriage, divorce, early marriage, forced marriage • family duties • parental relation to children • intimate relations, sexuality • religious practices • politics
Pressures, stresses, difficulties	Information about the major difficulties for women or men
HOUSING	
Obstacles access to housing and reasons to obstacles	<ul style="list-style-type: none"> • What are the greatest obstacles reported in providing/access to housing for asylum seekers and refugees in the local environment/setting, in the country at large? • No housing, • No collaboration, • No clear information • What are the reasons for these obstacles according to the stakeholders? • Public debates, • Housing shortage • Other
Responsible for housing	<ul style="list-style-type: none"> • Who is responsible for housing at the local level? • Public authorities, • National, regional or local authorities • Private or contracted partners
Alternatives for housing	<ul style="list-style-type: none"> • What alternatives for housing exists and are utilized? • Publicly owned, • Private business, • Private (in-house renting), • Shelters, • Black market • Illegal?
Networks for housing	<ul style="list-style-type: none"> • Are there local networks/collaborative efforts for coping with housing issues? • Who is cooperating? • Are there any conflicts?
LABOUR MARKET	
Access to labour market after decision / after receiving work permission	<p>In general, may include information of regulations regarding access to labour market after decision</p> <ul style="list-style-type: none"> • Validation of skills and recognition of qualifications and prior experience <p>May include information on procedure of academic and professional qualifications recognition and eventual problems in this area</p> <ul style="list-style-type: none"> • Challenges and barriers <p>Information regarding different issues that made integration into labour market more difficult as: language barriers, culture barriers.</p> <ul style="list-style-type: none"> • Facilitators <p>May include information regarding vocational trainings focused on acquisition of work skills, also dedicated for special groups as women or young people, integration programs</p>

Employment in the informal labour market	May include information regarding participation in informal labour market, opinion on such solutions and attempts to regularization of informal employment of refugees by host states.
The Role of NGO's and other non-governmental institutions	Actions specially dedicated to the role of NGO and other non-governmental actors
EDUCATION	
Host country language teaching	<ul style="list-style-type: none"> • How refugees and foreigners are taught the host country language (who provides the classes, when the teaching starts?) • How the curricula look like in general (is it tailored towards refugees/according to the region/country of origin, etc.)?
Educational challenges	<ul style="list-style-type: none"> • Barriers to education of refugees in the host country (obstacles and problems present in the system of education offered to refugees and asylum seekers); • Obstacles to schools and NGOs in providing education to refugees and asylum seekers;
Good practices in education	<p>Good practices in education of refugees and asylum seekers:</p> <ul style="list-style-type: none"> • On the level of education policy makers (government, local government) • On the levels of practitioners (schools, NGOs, centre for foreigners); • Educational incentives present in host country
PLACE OF RESIDENCE (PoR)	
Policies and measures	Expert discussion on the policy framework, e.g. dispersal policies and their assessment
Preferences PoR	Assessment about where refugees would prefer to live in the host country; discussion
Consequences of refugee presence	Discussion of the consequences of refugee presence on cities and more rural areas on the labour market, the housing market etc.
PUBLIC MENTAL HEALTH	
Health provision in different domains of life:	<p>Health provision can be on levels such as:</p> <ul style="list-style-type: none"> • psychological, • biological/physical, • social, • ecological (referring to environment, nature, neighbourhood, climate), • existential (referring to one's religious/spiritual (rituals such as praying or fasting) or cultural (art, music, holidays) ways of making meaning, one's worldview, or ideology).
Obstacles to welfare and health provisions	<p>These can be based on reasons such as:</p> <ul style="list-style-type: none"> • language • information • economy • geography • discrimination • other
Organisational approach, whether health support is or is not available	<p>Conditions for health support:</p> <ul style="list-style-type: none"> • geographical closeness/distance • cultural/religious acceptance/not acceptance • other
Policies and programs, whether these are efficient or not efficient	<p>Conditions for the result of policies or programs:</p> <ul style="list-style-type: none"> • holistic approach • cultural sensitivity

	<ul style="list-style-type: none"> • religious sensitivity • age sensitivity • gender sensitivity • other
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Annex III: Semi-structured interview guide of integration

Micro level

Life in the Current Country - General encounter

Guiding Questions

- Did you come here on your own or with others (friends/relatives)? Did you know anyone in [country]? Did you have anyone (relatives/friends) who was already living here?
- How did you feel received in the new country just after arrival, and how is it now? Can you name a particular incident, both positive and negative?
- After you first arrived, what happened? What were your most immediate needs? Who (e.g. state agencies, NGOs, single persons) provided you with accommodation and means of subsistence (e.g. food, clothes, etc....)?
- What has changed in your life (positively and/or negatively) after starting a life here?
- According to your personal experience, has life in [country] affected your social relations [both practices and values related to: men/women, marriage, family duties, children, sexuality, religion, politics]? What are the social expectations towards women and men around you?
- People on television and newspapers such as politicians and journalists often talk about the need for immigrants to “integrate” into the society. What do you understand by integration and what is a good integration for you? How do you relate to this? What are the challenges that you see?
- Have (or are you) participated (ing) in an “integration programme”? If so, what is it like/how has your experience been? Do you find it is an important thing to do?
- To what extent are you interested in social, political and economic issues in [country] and your home country? Do you follow the news in your home country? Are you involved in the activities of associations of your home country? Are you involved in political activities in [current country]?

Life in the Current Country – Employment, Education, Residence

Guiding Questions

- Do you work now or have worked earlier in [country]? If yes, please describe your job/s and what it is like to work here. How long did it take you to find a job and how did you find it? Have your jobs been compatible with your skills/education/language? Do you feel comfortable doing these types of work or would you rather do something else?
- Have you ever experienced any obstacles or problems with finding a job or at work? For example, have you experienced formal obstacles or abuse? How have you dealt with these problems? Have you turned to anyone for help or assistance? If yes, how were you assisted?
- Have you attended any training, courses, or language lessons here? If yes, please try to detail them (who pays for it? How difficult is it to access these courses? Who do you need to speak to? Is it obligatory or optional to attend?)
- Please, describe your current place of residence. What is it like and how did you find it? Do you pay for it yourself or do you receive help with the rent? If so, from whom? How long have you lived there? Are you happy/feel at home there or would you rather move somewhere else? With whom do you live? What have each of you done or like to do to make this space feel like home, including furnishings and decorations, etc.?
- Please, describe your current neighbourhood (and the community in general). What is it like to live there? Do you have contact with your neighbours? Do you know who lives next

to you? Do you feel comfortable/safe/happy walking around in this neighbourhood? Do you feel you have opportunities to engage with the wider community?

- Do you like to live here? If you would rather live somewhere else, what is your preferred place of residence in (country) or another country/city.
- Could you choose your current place of residence in [country]?
- What are the advantages or disadvantages you see regarding your current place of residence? For instance, regarding work, housing, schools, hospitals, language schools and social relations (contacts with neighbours, friends and family, embeddedness into the wider community)?

Health

Guiding Questions

- Has it happened since your arrival here that you felt pessimistic or depressed or experienced a difficult situation and needed help? If so, what did you do to handle the situation? Who did you turn to for help? Did it help, and if so, in what way?
- Have you needed/sought professional help regarding a particularly difficult health issue you may have had since arriving here?
- Do social obligations or ways of living in your new country create any pressures or stresses for you? If so, please describe in detail.
- Please describe your relationships with your family and friends. Are they a positive or negative source of emotional support to you? Can you describe your relations with the most important people in your life before you came here and now? How do significant persons in your life (for example, parents, siblings, teachers, friends, etc.) affect you as a person, both positively and negatively?
- What gives you meaning (purpose, goal in life, importance, motivation) in life today and before you came to your new country (for example religion, ideology, or another worldview)? How do close people around you affect your relation to what gives you meaning? What role do they play in your worldview? Did this change since you left your country?

Meso level

Stakeholder Interview Questions

General Questions

For smaller, non-IO/state funded participants:

1. When was your organization founded?
2. How many people work in your organization (full-time, part-time; paid staff, volunteers or trainees)?
3. How is it funded (by fees, donations, public money, EU funds, funds from IOs etc.)?
4. Do you consider your organization active in the following area/s? Please elaborate on:
 - Monitoring legal and policy changes across various governance levels (and studying law in action)
 - Participating in consultative bodies
 - Counselling and guidance
 - Advocacy
 - Daily support of refugees and asylum seekers
 - Political campaigning
 - Lobbying

Broad integration policy

1. What is the dominant understanding of "integration" of asylum seekers and refugees in (country)?
 - How is it expressed in political/public/media spheres?

- Does this understanding change depending on the asylum seeker/refugee group in question? If yes, please specify.

2. In your opinion, what are the greatest barriers to social acceptance/integration for asylum seekers and refugees in this community/region/country? Please give examples (what, when, where, how?).

- Have you encountered challenges in terms of the integration of particular asylum seeker/refugee groups? For example, issues related to cultural background, religious practices or gender norms?

Political Participation and Citizenship

1. **Do asylum seekers/refugees have a possibility to participate in decision making, and if so, in what extent** (i. e. regarding living conditions, labour, education)?

2. **Are asylum seekers/refugees able to pursue citizenship?** If so, what are the main difficulties they face? If not, why are they not pursuing citizenship?

Labour market: Policies and challenges

1. **What kinds of jobs are usually performed by asylum seekers and refugees?**

- Are these more often formal or informal? Do these jobs match their qualifications?
- How does one's legal status (asylum seeker, refugee, permanent resident, citizen) affect one's employment rights and conditions? Please elaborate.

2. **Are you aware of any entrepreneurial opportunities for refugees/asylum seekers in (country)?**

- Do refugees/asylum seekers have any possibilities to set up a sole proprietorship (one-man company)?
- Are there any other best practices in your opinion?

3. **What are the greatest obstacles for asylum seekers and refugees in entering the labour market and in the workplace?**

- What are the reasons for these obstacles (i.e. language, recognition of diplomas, cultural differences)?
- How efficient are existing policies and programmes in tackling these obstacles?
- Are there any initiatives targeting potential employers and if yes, can you elaborate on these?

Place of residence: Preferences and consequences

1. **Where are most asylum seekers and refugees residing in (country)?**

- Do they have a say in where they are placed? Where would they prefer to live in (country)?

2. **What is the impact of the presence of asylum seekers and refugees in different spatial settings** such as urban/rural; inside/outside refugee camps (e.g. labour and housing market, education system, healthcare sector)?

Housing: Policies and challenges

1. **In your experience, what are the greatest obstacles in providing/access to housing for asylum seekers and refugees in (country)?** What are the reasons for these obstacles (e.g. public debates, housing shortage, etc.?)

- What changes would you recommend?

2. **How efficient are existing policies and programmes in tackling these obstacles?**

Education policies

1. **What are the programmes and measures regarding education for asylum seekers and refugees, and how do these programmes help them to integrate into (country/community)?**

- What are the main challenges in implementing these educational programmes and measures for children and adults?

2. Is there any vocational training (e.g., language courses, recognition of educational qualification) or other provided for refugees/asylum seekers? If yes, please, give some examples.

- How would you assess their effectiveness? Are they harmonized with the labour market situation (do they respond to the needs of the labour market)?

3. What are your thoughts about how religion is included in the public school curriculum, especially in relation to helping with multi-cultural integration (only relevant for some countries)

Social welfare including healthcare, psychosocial role of religion and mental health

1. What does your organization provide in terms of psychosocial health for asylum seekers and refugees?

2. Are there obstacles in terms of asylum seeker and refugee access to welfare provisions? In the same vein, are there obstacles to healthcare provisions? If so, can you elaborate on these?

- Do you think there are specific cultural and religious needs to the effective provision of these services? If so, how does your organization approach these? Is support available (internal or external)?

3. How efficient are existing policies and programmes in tackling these obstacles?

In sum, for the overall interview, would you like to add other aspects you did not mention so far?

Annex IV: Questions for Roundtable Discussions

1. How does your organization define international protection? According to your approach, which legal regimes and laws affect the field of protection (in positive as well as in negative ways)?

2. Please list at least five of your most important cooperation partners regarding your work with asylum seekers and refugees (this does not necessarily have to be a name, but please indicate the name of the organization/department and its function).

3. Please elaborate on how you coordinate with your partners. What are the challenges? How often do you meet with them and how effective do you find these meetings and the cooperation?

3. Do you think that the management of migration (both at the national and European level) is adequately funded? Can you explain which budget categories and activities you think would require further funding?

4. What do you find most challenging for your organization's work (day to day, financing, staffing, premises, work load, subject/topics, emotionally challenging, other difficulties such as governmental obstacles)?

5. How has your organization's work changed since the recent increase of asylum seekers and refugees (concerning topics and migrant groups, work load, administrative and legal contexts, funding etc.)?

References

- Abbas M., Tammam A. & Bartolomei J. (2018). Migrant and refugee populations: A public health and policy perspective on a continuing global crisis. *Antimicrobial Resistance and Infection Control*, 7(113).
- Alfadhli, K., Drury, J. (2016). Psychosocial support among refugees of conflict in developing countries: a critical literature review. *Intervention*. 2016;14(2):128-141.
- Ahmadi, F., Erbil, P., Ahmadi, N. & Cetrez, Ö (2019). Religion, Culture and Meaning-Making Coping: A Study Among Cancer Patients in Turkey. *Journal of Religion and Health*, (2019) Vol 58:4. DOI: 10.1007/s10943-018-0646-7.
- AIDA. (2018). Country Report Sweden. Available at: https://www.asylumineurope.org/sites/default/files/report-download/aida_se_2018update.pdf
- Bambra, C., Gibson, M., Sowden, A., Wright, K., Whitehead, M. & Petticrew, M. (2009). Tackling the wider social determinants of health and health inequalities: evidence from systematic reviews. *J Epidemiol Commun Health*; 64:284-291.
- Barthoma, S., Sivets, A., Arifuzzaman, R., Pettersson, J., Fritz, P., Rossi, A., ... Larsson, O. (2020). *Reception Policies, Practices and Responses: Sweden Country Report* (Global Migration: Consequences and Responses - RESPOND Working Paper Series). Uppsala. <https://doi.org/10.5281/zenodo.3685151>.
- Bernitz, H. (2012). Country Report: Sweden. EUDO Citizenship Observatory. Badia Fiesolana: European University Institute.
- Bogic, M., Njoku, A., Priebe, S. (2015). Long-term mental health of war refugees: a systematic literature review. *BMC Int Health Human Rights*. 2015:15:29.
- Boyd-MacMillan, E. & DeMarinis, V. (2020). *Learning Passport: Curriculum Framework (IC-ADAPT SEL high level programme design)*. Cambridge, UK: Cambridge University Press & Cambridge Assessment.
- Borevi, K. (2017) Diversity and Solidarity in Denmark and Sweden. In: Keith Banting and Will Kymlicka (Eds.), *Strains of Commitment: The Political Sources of Solidarity in Diverse Societies* (pp. 364-388). Oxford: Oxford University Press.
- Borevi, K. (2014). Multiculturalism and welfare state integration: Swedish model path dependency. *Identities*, 21(6), 708–723. <https://doi.org/10.1080/1070289X.2013.868351>
- Borevi, K., and Shakra, M (2019). Sweden- Country Report: Border Management and Migration Controls in Sweden: Country Report. RESPOND Migration. [online] Available at: <http://uu.diva-portal.org/smash/record.jsf?pid=diva2%3A1343561&dswid=2297> [Accessed October 2019].
- Braveman, P., Gottlieb, L. (2014). The social determinants of health: it's time to consider the causes of the causes. *Public Health Reports*. 2014;129 (Suppl 2):19-31.
- Campion, J., Coombes, C. & Bhaduri, N. (2017). Mental health coverage in needs assessments and associated opportunities. *Journal of Public Health*, 39(4), 813–820 <https://academic.oup.com/jpubhealth/article/39/4/813/2595388>.
- Çelikaksoy, A. & Wadensjö, E. (2019). Refugee Youth Who Arrived in Sweden as Unaccompanied Minors and Separated Children: *Nordic Journal of Migration Research*, 9(2), 179–200. doi: 10.2478/njmr-2019-0020.
- Cetrez, Ö., DeMarinis, V., Sundvall, M., Fernandez, M., Borisoca, L. & Titelman, D (Forthcoming). A Public Mental Health Study Among Iraqi Refugees in Sweden: Highlighting Gender and Cultural Characteristics. In *Frontiers*.

- Cheung Chung, M., AlQarni, N., AlMazrouei, M., Al Muhairi, S., Shakra, M., Mitchell, B., Al Mazrouei, S. & Al Hashimi, S. (2018). The impact of trauma exposure characteristics on post-traumatic stress disorder and psychiatric co-morbidity among Syrian refugees. *Elsevier Psychiatry Research* 259, pp.310-315.
- DeMarinis, V. (2018). Public mental health promotion in a public health paradigm as a framework for countering violent extremism. In: G. Øverland, G. and A. Arnfinn (Eds.) *Processes of violent radicalisation in the 21st century*. Newcastle upon Tyne: Cambridge Scholars Publishing.
- DeMarinis, V. (2014). Public mental health promotion, meaning-making and existential meaning: Challenges for person-centered care of refugees in a secular, pluralistic context. In: G. Overland, E. Guribye, B. Lie (Eds.) *Nordic Work with Traumatized Refugees: Do We Really Care*. Newcastle upon Tyne: Cambridge Scholars (pp. 316-324).
- DeMarinis, V. (2008). The Impact of Postmodernization on Existential Health in Sweden: Psychology of Religion's Function in Existential Public Health Analysis. *Archive for the Psychology of Religion*, 30, 57-74.
- DeMarinis, V., Boyd-MacMillan, E. (2019). *A mental health approach to understanding violent extremism*. EU Radical Awareness Network. (RAN) Policy & Practice Report. [online] Available at: https://ec.europa.eu/home-affairs/sites/homeaffairs/files/what-we-do/networks/radicalisation_awareness_network/about-ran/ran-h-and-sc/docs/ran_hsc_prac_mental_health_03062019_en.pdf. [Accessed 25 March 2020].
- Denkelaar, M. (2018). Refugee Education in Sweden. *Stockholm : SIRIUS - Policy Network on Migrant Education*. [online] Available at: <http://www.sirius-migrationeducation.org/wp-content/uploads/2018/10/Refugee-Education-in-Sweden-final.pdf>. [Accessed 25 March 2020].
- Dessimirova, D., Grondin, C., & Williams, M. (2017). The social and employment situation in Sweden. *European Parliament*. [online] Available at: [https://www.europarl.europa.eu/RegData/etudes/BRIE/2017/602064/IPOL_BRI\(2017\)6_02064_EN.pdf](https://www.europarl.europa.eu/RegData/etudes/BRIE/2017/602064/IPOL_BRI(2017)6_02064_EN.pdf). [Accessed 25 March 2020].
- EMN. (2018). *Annual Report on Migration and Asylum 2017 Sweden*. [online] Available at: https://ec.europa.eu/home-affairs/sites/homeaffairs/files/17a_sweden_arm_part2_2017_en.pdf. [Accessed 25 March 2020].
- Eriksson, E. (2019). *Perspektiv på integration och etablering: kunskapsunderlag för ett strategiskt arbete med stöd till nyanlända*. Linköpings universitet, Institutionen för studier av samhällsutveckling och kultur, Centrum för kommunstrategiska studier – CKS.
- European Commission. (2020). European Health Insurance Card. [online] Available at: <https://ec.europa.eu/social/main.jsp?catId=559> [Accessed Feb 2020]
- European Commission. (2019) Governance of Migrant Integration in Sweden.[online]Available at: <https://ec.europa.eu/migrant-integration/governance/sweden> [Accessed Feb 2020]
- EUR-Lex. (2020). Directive 2011/24/EU on the application of patients' rights in cross-border healthcare in other EU countries. [online] Available at: <https://eur-lex.europa.eu/legal-content/EN/LSU/?uri=CELEX:32011L0024> [Accessed Feb 2020]
- FederalMinistry of interior. (2020). [online], Available at: <https://bmi.bund.de/DE/themen/verfassung/staatsangehoerigkeit/einbuengerung/einbuengerung-node.html> <https://bundesauslaenderbeauftragte.de/einbuengerung.html> [Accessed Feb 2020]

- Fratzke, S. (2017). *Weathering Crisis, Forging Ahead: Swedish Asylum Policy*. *Migration Policy Institute*.
- Garcés-Mascareñas, B. & Penninx, R. (2016). The concept of Integration as an Analytical Tool and as a Policy Concept. In Garcés-Mascareñas, B. and Penninx, R. (Eds) *Integration Processes and Policies in Europe, Contexts Levels and Actors*. (pp. 11-29). Springer, Cham.
- Ghazinour, M., Hansson, J., Lauritz, L-E., Padyab, M., Sundqvist, J., Wimelius, M., E. & Ögren, K. (2015). En resa med tvång: Erfarenheter av avvísningar och utvisningar av ensamkommande asylsökande flyktingbarn. [A journey with force: Experiences of rejection and expulsion of unaccompanied asylum seeking refugee children] Polisutbildningens skriftserie, nr 4. Umeå: Print & Media.
- Governmental Bill.** (2016/7:175). Ett nytt regelverk för nyanlända invandrades etablering i arbets-och samhällslivet. *Regeringens proposition*, [online] Available at: <https://www.regeringen.se/4965e5/contentassets/4ecccf8c5d74e0c8b5110289265d866/ett-nytt-regelverk-for-nyanlanda-invandrades-etablering-i-arbets--och-samhallslivet-prop.-201617175>. [Accessed 25 March 2020].
- Government Bill. (2015/16:174). Tillfälliga begränsningar av möjligheten att få uppehållstillstånd i Sverige. [pdf] Regeringskansliet. Available at: <Förslag om att tillfälligt begränsa möjligheten att få uppehållstillstånd i Sverige, Prop. 2015/16:174 (pdf 2 MB)> [Accessed February 2020]
- Government Offices of Sweden.* (2017). Mål för nyanländas etablering. [online] **Regeringen (2020a)**. [online] Available at: <https://www.regeringen.se/regeringens-politik/nyanlandas-etablering/mal-for-nyanlandas-etablering/>. [Accessed 25 March 2020].
- Government of Offices of Sweden, (2019). Ministry of Employment initiatives in the Budget Bill for 2018. [online] Available at: <https://www.government.se/articles/2017/09/ministry-of-employment-initiatives-in-the-budget-bill-for-2018/> [Accessed February 2020]
- Government Offices of Sweden (2019) Ministry of Employment initiatives in the Budget Bill for 2020. "Measures to get more people into work": Available at: <https://www.government.se/articles/2019/09/measures-to-get-more-people-into-work/>
- Government Offices of Sweden (2020)*. Measures to get more people into work. (2019). [online] **Budget Bill** . Available at: <https://www.government.se/articles/2019/09/measures-to-get-more-people-into-work/>. [Accessed 25 March 2020].
- Hahn, R. A. & Truman, B. I. (2015). Education Improves Public Health and Promotes Health Equity. *International journal of health services: planning, administration, evaluation*, 45(4), 657–678. doi:10.1177/0020731415585986.
- Hansen, K. (2018). 'Egalitarianism Under Siege? Swedish Refugee Reception and Social Trust, Egalitarianism in Scandinavia'. *Approaches to Social Inequality and Difference*, p. 269-289.
- Hynie, M. (2018). The Social Determinants of Refugee Mental Health in the Post-Migration Context: A Critical Review. *The Canadian Journal of Psychiatry*. Vol 63(5).
- Kalra, G., Christodoulou, G., Jenkins, R., Tsipas, V., Christodoulou, N., Lecic-Tosevski, D., . . . Bhugra, D. (2012). Mental health promotion: Guidance and strategies. *European Psychiatry*, 27(2), 81-86. [online] Available at <http://www.sciencedirect.com/science/article/pii/S092493381100160X>. doi:<http://doi.org/10.1016/j.eurpsy.2011.10.001>. [Accessed 25 March 2020].
- Khan, J., Bidart , T. & Todorksa, I. (2019). Access To Education For Refugee And Migrant

- Children In Europe. *UNHCR, UNICEF, IOM*. [online] Available at: <https://www.unhcr.org/neu/wp-content/uploads/sites/15/2019/09/Access-to-education-europe-19.pdf>. [Accessed 25 March 2020].
- Lag. (2017:584) om ansvar för etableringsinsatser för vissa nyanlända invandrare. [online] Available at: https://www.riksdagen.se/sv/dokument-lagar/dokument/svensk-forfattningssamling/lag-2010197-om-etableringsinsatser-for-vissa_sfs-2010-197. [Accessed 25 March 2020].
- Länsstyrelsen i Stockholm (2020 a). mottagande och Etablering av nyanlända. [online] Available at: <https://www.lansstyrelsen.se/stockholm/samhalle/social-hallbarhet/integration/mottagande-och-etablering-av-nyanlanda.html> [Accessed 15 juli 2020].
- Länsstyrelsen i Stockholm (2020 b). Bidrag för att utveckla kapacitet och beredskap i mottagandet av nyanlända. [online] Available at: <https://www.lansstyrelsen.se/stockholm/samhalle/social-hallbarhet/integration/bidrag-for-att-utveckla-kapacitet-och-beredskap-i-mottagandet-av-nyanlanda.html> [Accessed 15 juli 2020].
- Mawani, F. N. (2014). Social determinants of refugee mental health. In: Simich L, Anderman L, (Eds.) *Refuge and Resilience: Promoting Resilience and Mental Health among Resettled Refugees and Forced Migrants*. New York, NY: Springer, p. 27-50.
- Kenzie, K. J., Tuck, A. & Agic, B. (2014). Mental Healthcare Policy for Refugees in Canada. In Simich, Laura, & Andermann, Lisa (Eds.) *Refuge and Resilience: Promoting Resilience and Mental Health among Resettled Refugees and Forced Migrants*. Dordrecht: Springer.
- Midtbøen, A. H., Birkvad, S. R. & Erdal, M. B. (2018). Nordisk Ministerråds sekretariat, & Nordiska ministerrådet. *Citizenship in the Nordic countries: Past, present, future*. Copenhagen: Nordisk Ministerråd. doi:10.6027/TN2018-522.
- Migrationsinfo.se. (2019). Effekter av boendesegregation [Effects of living segregation]. <https://www.migrationsinfo.se/valfard/boende/effekter-av-boendesegregation/#fn-245->. Received 2019-06-14.
- Migrationsverket. (2020). *Historik*. [online] Available at: <https://www.migrationsverket.se/Om-Migrationsverket/Migration-till-Sverige/Historik.html>. [Accessed 25 March 2020].
- Miller, G., Chen, E. & Cole, SW. (2009). Health psychology: developing biologically plausible models linking the social world and physical health. *Ann Rev Psychol*. 2009;60:501-524.
- Miller, KE. & Rasmussen, A. (2016). The mental health of civilians displaced by armed conflict: an ecological model of refugee distress. *Epidemiol Psychiatr Sci*. 26:129-138.
- Ministry of Employment initiatives in the Budget Bill for 2018. (2017). *Government offices of Sweden*. [online] Available at: <https://www.government.se/articles/2017/09/ministry-of-employment-initiatives-in-the-budget-bill-for-2018/>. [Accessed 25 March 2020].
- Nuhoglu Soysal, Y. (2012). Citizenship, immigration and the European Social Project: rights and obligations of individuality. *The British Journal of Sociology*, 63 (1).
- OECD. (2016). *Better Policies Series. Promoting Well-Being and Inclusiveness in Sweden*. Pelling, L. & Dahl, M. (Eds.) (2017, January 25-27th) *Welcoming Refugees: Local European Experiences*. Norrköping, Sweden. available at: <https://liu.se/liu-nytt/arkiv/nyhetsarkiv/1.712868/1.713181/WelcomingRefugeesreport.pdf>
- Osanami Törngren, S., Öberg, K. & Righard, E. (2018). The role of civil society in the integration of newly arrived refugees in Sweden. In (Ed.) Läce, A. *Newcomer Integration*

- in Europe: Best Practices and Innovations Since 2015. Foundation for European Progressive Studies.
- Prop. 1997/98:16, Sverige, framtiden och mångfalden – från invandrarpolitik till integrationspolitik [Sweden, the future and plurality - from immigration policies to integration policies].
- PHAS. (2020). Regional Comparisons Public Health 2019. [online], Available at: <https://www.folkhalsomyndigheten.se/the-public-health-agency-of-sweden/public-health-reporting/regional-comparisons-public-health-2019/> [Accessed February 2020]
- Ransome, Y. (2020). Religion Spirituality and Health: New Considerations for Epidemiology. Oxford University Press. DOI: 10.1093/aje/kwaa022
- Regeringens långsiktiga strategi för att minska och motverka segregation. (2018). Regeringen (2020b). [online] Available at: <https://www.regeringen.se/informationsmaterial/2018/07/regeringens-langsiktiga-strategi-for-att-minska-och-motverka-segregation/>. [Accessed 25 March 2020].
- Regeringen. (2018). Samhällsorientering för nyanlända ska handla mer om normer och värderingar. [online], Available at: <https://www.regeringen.se/pressmeddelanden/2018/02/samhallsorientering-for-nyanlanda-ska-handla-mer-om-normer-och-varderingar/>. [Accessed Feb 2020]
- Riksdagen. (2019). samhällsorientering för asylsökande och nyanlända. [online], Available at: https://www.riksdagen.se/sv/dokument-lagar/dokument/svar-pa-skriftlig-frag/samhallsorientering-for-asylsokande-och-nyanlanda_H612955 [Accessed Feb 2020]
- Riksdagen. (2017), Förordning (2017:820) om etableringsinsatser för vissa nyanlända invandrare, Available at: https://riksdagen.se/sv/dokument-lagar/dokument/svensk-forfattningssamling/forordning-2017820-om-etableringsinsatser-for_sfs-2017-820,
- Röda Korset. (2018). Nedslag i verkligheten-tillgång till vård. [pdf] Available at: <https://www.rodakorset.se/globalassets/rodakorset.se/dokument/om-oss/fakta-och-standpunkter/rapporter/nedslag-i- verkligheten-2018.pdf> [Accessed February 2020]
- Röda Korset. (2020). Vård för papperslösa och andra migranter [online] Available at: <https://www.rodakorset.se/fa-hjalp/vard-for-papperslosa/> [Accessed February 2020]
- Region Stockholm. (2020). Law and regulations. [online], Available at: <https://www.siso.sll.se/en/Safeandsecurecare/Lawsandregulations/> [Accessed February 2020]
- Salami B., Yaskina, M., Hegadoren, K., Diaz, E., Meherali, S., Rammohan, A. & Ben-Shlomo, Y. (2017). Migration and social determinants of mental health: Results from the Canadian Health Measures Survey. *Canadian Public Health* Vol (4) p. 362-367. doi: 10.17269/CJPH.108.6105
- SCB. (2019). *Labour Force Surveys 2018*. [online] Available at: <https://www.scb.se/en/finding-statistics/statistics-by-subject-area/labour-market/labour-force-surveys/labour-force-surveys-lfs/pong/publications/labour-force-surveys-lfs-2018/>. [Accessed 25 March 2020].
- Service-Public.fr. (2020). Naturalisation. [online] Available at: <https://immigration.interieur.gouv.fr/service-public.fr/particuliers/vosdroits/F2213> [Accessed February 2020]
- Shakra, M. & Szalanska, J. (2019). *Refugee Protection Sweden - Country Report*, Multilevel Governance of Mass Migration in Europe and Beyond Project (#770564, Horizon 2020), Report Series.
- Shakra, M., Wirman, J., Szalanska, J., Cetrez, Ö. (2018). Legal and Policy Framework of Migration Governance: Sweden Country Report. RESPOND 74. [online], Available at: <https://zenodo.org/record/1418587#.Xh9SaMhKg2w> [Accessed November 2019]

- Silove, D. (2013). The ADAPT model: a conceptual framework for mental health and psychosocial programming in post conflict settings, *Intervention*. Volume 11, #3; pp.237 - 248.
- Simich, L. & Andermann, L. (Eds.) (2014). *Refuge and Resilience: Promoting Resilience and Mental Health among Resettled Refugees and Forced Migrants*. Dordrecht: Springer Netherlands.
- Siriwardhana, C., Ali, SS., Roberts, B., Stewart, R. (2014). A systematic review of resilience and mental health outcomes of conflict drive adult forced migrants. *Conflict Health*. 2014;8:1-14.
- Skolverket. (2018:1562). *Elever och skolenheter i grundskolan läsåret 2018/2019* [Pupils and school units in primary school, the academic year 2018/2019].
- Socialstyrelsen. (2019). Vilken vård ska en region erbjuda asylsökande och papperslösa?. [online] Available at: <https://www.socialstyrelsen.se/stod-i-arbetet/asylsokande-och-andra-flyktingar/halsovard-och-sjukvard-och-tandvard/erbjuden-varld/> [Accessed February 2020]
- Socialstyrelsen. (2015). Hälso- och sjukvård och tandvård till asylsökande och nyanlända. [pdf] Available at: <https://www.socialstyrelsen.se/globalassets/sharepoint-dokument/artikelkatalog/ovrigt/2016-10-13.pdf> [Accessed February 2020]
- SOU. (2019:18). *För flerspråkighet, kunskapsutveckling och inkludering. Modersmålsundervisning och studiehandledning på modersmål*, p 44.
- Social Democrats. (2019). Utkast till sakpolitisk överenskommelse mellan Socialdemokraterna, Centerpartiet, Liberalerna och Miljöpartiet de gröna. [pdf] Available at: <https://www.socialdemokraterna.se/download/18.1f5c787116e356cdd25a4c/1573213453963/Januariavtalet.pdf> [Accessed February 2020]
- Statista. (2019). *Number of upper secondary schools in Sweden*. [online] Available at: <https://www.statista.com/statistics/539304/sweden-number-of-upper-secondary-schools>. [Accessed 25 March 2020].
- Sundell L. S. (2010). *Olika villkor - olika hälsa: Hälsan bland irakier i åtta av Sveriges län 2008*. [Different terms - Different health: Health among Iraqis in eight of Sweden's counties 2008] A report by Malmö University, within the research project IMHAd (Impact of Multicultural Health Advisors).
- Svantesson. E (2019). Kravet för bidrag: Gå kurs i svenska värderingar. [online] Available at: <https://www.expressen.se/debatt/kravet-for-bidrag-ga-kurs-i-svenska-varderingar/> [Accessed February 2020]
- Sweden. (2020). Healthcare in Sweden. [online], Available at: <https://sweden.se/society/health-care-in-sweden/> [Accessed February 2020]
- Swedish Migration Agency. (2020a). The Swedish Resettlement programme. [online] Available at: <https://www.migrationsverket.se/English/About-the-Migration-Agency/Our-mission/The-Swedish-resettlement-programme.html> [Accessed Feb 2020]
- Swedish Migration Agency. (2020b). Migrationsverket varslar om uppsägningar. [online] Available at: <https://www.migrationsverket.se/Om-Migrationsverket/Pressrum/Nyhetsarkiv/Nyhetsarkiv-2020/2020-01-14-Migrationsverket-varslar-om-uppsagningar.html> [Accessed Feb 2020]
- Swedish Migration Agency. (2020c). Fees for Swedish Citizenship. [online] Available at: <https://www.migrationsverket.se/English/Private-individuals/Becoming-a-Swedish-citizen/Fees.html> [Accessed Feb 2020]
- Swedish Migration Agency. (2020d). Vad innebär svenskt medborgarskap. [online], Available at: <https://www.migrationsverket.se/Privatpersoner/Bli-svensk-medborgare/Vad-innebar-svenskt-medborgarskap.html> [Accessed Feb 2020].

- Swedish Migration Agency. (2020e). Family reunification. [online] Available at: <https://www.migrationsverket.se/English/Private-individuals/Protection-and-asylum-in-Sweden/When-you-have-received-a-decision-on-your-asylum-application/If-you-are-allowed-to-stay/Family-reunification.html>[Accessed Feb 2020]
- Swedish Migration Agency. (2020f). Statistik om Svenskt medborgarskap. [online] Available at: <https://www.migrationsverket.se/Om-Migrationsverket/Statistik/Svenskt-medborgarskap.html>[Accessed Feb 2020]
- Swedish Migration Agency. (2019a). Migrationsverkets bedömning av identitetsdokument. [online] Available at: <https://www.migrationsverket.se/Privatpersoner/Bli-svensk-medborgare/Medborgarskap-for-vuxna/Styrkt-identitet/Migrationsverkets-bedomning-av-identitetsdokument.html#Innehall> [Accessed Feb 2020]
- Swedish Migration Agency. (2019b). Förlängning av den tillfälliga lagen träder I kraft. [online] Available at: <https://www.migrationsverket.se/Om-Migrationsverket/Pressrum/Nyhetsarkiv/Nyhetsarkiv-2019/2019-07-19-Forlangning-av-den-tillfalliga-lagen-trader-i-kraft.html> [Accessed Feb 2020]
- Swedish Migration Agency. (2019c). Årsredovisning 2019 [pdf] Available at: <https://www.migrationsverket.se/download/18.2b2a286016dabb81a186962/1582201496682/%C3%85rsredovisning%202019.pdf> [Accessed Feb 2020]
- Swedish Migration Agency. (2018a). Årsredovisning 2018 [pdf] Available at: https://www.migrationsverket.se/download/18.748d859516793fb65f91654/1550847536193/Migrationsverket_%C3%85rsredovisning_2018.pdf [Accessed October 2019].
- Swedish Public Employment Service. (2020). *Monthly Statistics*. [online] Available at: <https://arbetsformedlingen.se/om-oss/statistik-och-analyser/statistik>. [Accessed 25 March 2020].
- Tamas K., Pale J., & Ruhs M. (2019). *Bridging the Gaps - Linking Research to Public Debates and Policy Making on Migration and Integration*. Oxford University Press.
- The National Institute of Economic Research (NIER). (2019). *The Swedish Economy October 2019*. [online] Available at: <https://www.konj.se/download/18.2ce76e1a16d62eaa0d2d9819/1570535057019/SE-Oct2019.pdf>. [Accessed 25 March 2020].
- Törngren, S. O., Öberg, K. & Richard, E. (2018). The role of civil society in the integration of newly arrived refugees in Sweden. In *Newcomer Integration in Europe: Best Practices and Innovations since 2015*. Brussels, Belgium: FEPS Foundation for European Progressive Studies.
- Trading Economics. (2020). *Sweden Unemployment Rate - 1980-2020*. Data: 2021-2022 Forecast: [online] Available at: <https://tradingeconomics.com/sweden/unemployment-rat>. [Accessed 25 March 2020].
- Ungar, M. (2012). *The social ecology of Resilience: A Handbook of Theory and Practice*. New York: Springer Verlag.
- UNHCR. (2019). UNHCR observations on the Law Proposal " Förlängning av lagen om tillfälliga begränsningar av möjligheten att få uppehållstillstånd i Sverige- Utkast till lagrådsremiss" .[pdf] regeringen. Available at: <https://www.regeringen.se/495171/contentassets/e96731d263df43c39569a3a9998d6741/unhcr.pdf> [Accessed February 2020]
- Vårdgivarguiden. (2018). Hälsokommunikatörer I Stockholms län. [online] Available at: <https://vardgivarguiden.se/utbildning/halsokommunikatorer/> [Accessed February 2020]
- WHO. (2016). *Public health, trade, foreign policy, diplomacy and health*. World Health Organization. Retrieved from <http://www.who.int/trade/glossary/story076/en/>
- WHO. (2016). *Mental health: strengthening our response Fact Sheet* (Updated April 2016) <http://www.who.int/mediacentre/factsheets/fs220/>World Health Organization. (2019).

Global school health initiative. https://www.who.int/school_youth_health/gshi/en/.
Received 2019-07-06.

WHO. (2014). *World Health Organization and Calouste Gulbenkian Foundation. Social determinants of mental health*. Geneva, Switzerland: World Health Organization; 2014.

WHO. (2008). *Commission on Social Determinants of Health. Closing the gap in a generation: health equity through action on the social determinants of health*. Geneva, Switzerland: World Health Organization; 2008.

Wu, Q., Ge, T., Emond, A, Foster, K., Gatt, JM., Hadfield, K., Mason-Jones, AJ., Reid, S., Theron, L., Ungar, M. & Woules, TA. (2018). Acculturation, resilience and the mental health of migrant youth: a cross country comparative study. *Public Health; Vol 162* p. 63-70. doi: 10.1016/j.puhe.2018.05.006.

Ökad arbetslöshet under 2019 [online] Available at: <https://www.scb.se/hitta-statistik/statistik-efter-amne/arbetsmarknad/arbetskraftsundersokningar/arbetskraftsundersokningarna-aku/pong/statistiknyhet/arbetskraftsundersokningarna-aku-arsmedeltal-2019/>

Öppna jämförelser folkhälsa. (2019). [pdf] Available at:
<https://www.folkhalsomyndigheten.se/contentassets/ec714fca0b0145eab3d7924511550a74/oppna-jamforelser-folkhalsa-2019-18076.pdf> [Accessed February 202