

Symposium | Imigrant, Refugee : [Symposium 33] Mental Health Support for Latin American Migrants.

📅 Fri. Sep 26, 2025 10:40 AM - 12:10 PM JST | Fri. Sep 26, 2025 1:40 AM - 3:10 AM UTC 🏢 Session Room 4 (Large Hall B)

[Symposium 33] Mental Health Support for Latin American Migrants.

Moderator: Yu Abe (Yotsuya Yui Clinic), Masaharu Uemoto (Kobe City College Nursing)

[SY-33-03] Family Reunification, Mental Health and Ulysses Syndrome in Latin American families in London

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Keywords : International migration、Ulysses Syndrome、Family reunification、Mental Health

Background: Migration alters the family unit, affects mental health and enhances Ulysses syndrome, and moreover, the experience in relationships and attachment styles can severe the expression of the syndrome in Latin American migrants.

Objective: To analyse the effect of a regrouped vs. grouped family on Ulysses syndrome and anxiety and depression in Latin American migrants from London, as well as to differentiate family attachment and couple experience based on the expression of Ulysses syndrome.

Method: non-experimental, comparative, non-random. 93 Latin American immigrants were evaluated (regrouped 40, grouped 53), who voluntarily answered the interview seven Migration Duels (Achotegui, 2002), Hamilton scales of anxiety and depression, experience in Relationships and Attachment. The IBM-SPSS statistic® was used.

Results: Migrants with a grouped vs. regrouped family, aged 41.6 ± 12.9 years and 19.5 ± 8.6 years in a migration situation, showed no differences ($p > 0.05$) in female gender), age, or migration time. 59.1% were diagnosed with Ulysses syndrome, with vulnerability factors (65.2%) and stressors (59.0%). In complicated to extreme levels, grief by language (mother tongue) (64%), by family (57.3%) and by social status (50.6%) stood out. In mourning for the land (22.5%) and for physical risk (32.6%) there was less affectation. The irrigation relationship between clustering vs regrouping and Ulysses syndrome gave $OR=1.655$ (95%CI=0.687; 3.987), which suggests the tendency for regrouping to be an irrigation factor. In anxiety, depression, relationships and attachment style, there were no significant.

Conclusion: although there were mental health conditions, there were no differences between grouped and regrouped, deepening the expression of Ulysses syndrome. Early reception and ease of grouped migration would prevent the syndrome and mental health effects.