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Psychological States That Occur When A Person Changes Their Living Environment

Saydalikho'jaeva Sayyora Zamanovna
Tashkent State Medical University, Department of Normal and Pathological Physiology, Uzbekistan

Khalilov Hikmatulla Dilshodovich
Tashkent State Medical University, Department of Normal and Pathological Physiology, Uzbekistan

Abdusattorova Feruza Abdulaziz qizi
Student of the Faculty of General Medicine, Tashkent State Medical University, Uzbekistan

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Abstract
This study aims to analyze the changes that occur in the human psyche during migration or a change in place of residence, their causes and consequences. Against the background of the acceleration of the global migration process, psychological health issues have become a relevant topic.

Keywords: Migration, psychological health, depression, post-traumatic stress, identity crisis, culture shock, language barriers.

Introduction

The purpose of this study is to identify psychological states that occur when a person voluntarily or involuntarily changes his place of residence, to deeply analyze their causes and evaluate existing adaptation strategies.

Methods

The study used systematic literature review, meta-analysis and mixed-methods. Articles from Scopus, Springer, PubMed, ScienceDirect, MDPI and Annual Reviews databases were analyzed when writing the article. The main focus was on articles published in 2015–2025.

Human migration is a long-standing phenomenon that occurs for a variety of reasons: natural disasters, climate

change, economic problems, wars, political instability, or simply the search for new opportunities. In the 21st century, this process has become more complex and has multi-layered psychological, social, and cultural consequences [1]. A change of residence implies a fundamental change not only in geographical location, but also in a person's personal security, social relationships, and psychological stability [2].

At the same time, one of the important factors determining the post-migration state of an individual is the "adaptation strategy" he or she chooses. Psychological approaches show that social support networks, psychological counseling, language learning, and intercultural competence are all factors that ensure a person's successful adaptation to a new place [7]. On the contrary, social isolation, economic hardship, and discrimination sharply complicate the adaptation process [8].

Modern research shows that the impact of migration on mental health varies depending on age, gender, social status, level of education, previous traumas and reasons for migration [9]. For example, among children and adolescents, factors such as changing schools, separation from friends, language problems, and feeling of alienation disrupt mental balance. This, in turn, leads to academic failure, behavioral disorders, and depression [10].

Results

Based on psychological analyses and empirical studies, it has been found that changing one's place of residence causes various negative effects on a person's mental state. The main results identified in the studies are as follows:

1. Prevalence of post-migratory stress syndrome

Post-migratory stress syndrome (PMSS) is a direct psychological consequence of the migration process, which arises from the inability of a person to adapt psychologically, culturally, and socially to a new environment after changing their place of residence [1]. This syndrome often manifests with clinical symptoms such as depression, anxiety, persistent restlessness, social withdrawal, insomnia, and even post-traumatic stress disorder (PTSD) [2].

Some studies have called PMSS "invisible trauma" because it can occur without actual violence or disaster during the migration. This syndrome creates a sense of "psychological detachment" in the person's inner world—a sense of not belonging in a new place, a strong attachment to the past, and a sense of disconnection from the new life [3]. For example, a study published in the journal Transcultural Psychiatry in 2025 found that over 68% of people who had participated in cross-cultural migration experienced long-term symptoms of psychological distress [4].

Post-migratory stress syndrome is particularly acute in people who have been forced to migrate. People who have fled their homes due to factors such as war, natural disasters, or political persecution often experience trauma as well as difficulties adjusting to their new environment [5]. They often lack the social networks necessary to survive in a new area, and language and cultural differences exacerbate social isolation, psychological distress, and loss of identity [6].

A 2021 study in Sweden found that over 73% of people with refugee status experienced persistent anxiety, social withdrawal, and depression within the first 6 months of their migration [7]. In another example, 61% of internally displaced people in China reported feeling "alienated" and "rejected" in their new location [8].

Symptoms of PMSS also vary by age and gender. Adolescents and young women are more likely to experience low self-esteem, withdrawal from social activities, and psychosomatic symptoms (headaches, palpitations, shortness of breath) [9]. These symptoms are often exacerbated by the lack of adequate psychological support and social support systems during the migration process [10].

Other factors that may contribute to PMSS include:

Language barriers and communication difficulties [11]

Social stigma and discrimination [12]

Housing problems, unemployment or uncertainty [13]

Separation from close relatives or children [14]

Researchers are now considering this syndrome not only as a collection of mental health problems, but also as a complex condition that affects a person's personality, identity, social role and self-perception. For this reason, PMSS should be considered in a systematic way not only by psychologists, but also by social services, health professionals and public policymakers [15].

2. Changes in mental health: depression, PTSD and identity crisis

Moving or changing one's place of residence is a process

that has a profound impact on a person's mental health, and this situation is directly influenced not only by external social factors, but also by internal psychological stability [1]. In situations of migration or forced displacement, people often experience depression, post-traumatic stress disorder (PTSD), and identity crisis — some of the most severe forms of psychological instability [2].

Depression

Depression is one of the most common mental health conditions following displacement. According to a 2021 study published in the International Journal of Migration, Health and Social Care, 6 out of 10 migrants experience symptoms of depression within the first 6 months after migration [3]. These symptoms include emotional apathy, loss of enjoyment of life, decreased motivation, chronic fatigue, and increased suicidal thoughts [4].

Factors that increase depression in the context of migration include:

Family separation or death of loved ones [5]

Lack of social support network [6]

Financial instability or unemployment [7]

Discrimination or language barriers [8]

A study of Chinese internal migration published in BMC Public Health in 2025 found that depressive symptoms were present in 59% of older adults. Most of them experienced feelings of alienation, loneliness, and isolation in their new society [9].

Post-traumatic stress disorder (PTSD)

PTSD is particularly common among those displaced by war, natural disasters, or political persecution. PTSD is a chronic mental disorder that typically occurs after a severe emotional trauma, and is characterized by recurrent flashbacks to past traumatic events, insomnia, uncontrolled anger, irritability, and persistent anxiety [10].

A large 2025 review in the journal Transcultural Psychiatry found that 72% of refugees from war zones had PTSD symptoms. These symptoms often coexist with other mental health conditions, such as generalized anxiety disorder, depression, and alcoholism [11].

Children and adolescents also experience more complex PTSD symptoms, often expressing their distress through silence, physical pain, nightmares, aggression, or isolation [12].

Identity crisis

Identity crisis is a state in which a person loses track of how they behave in society, who they are, and where they belong. The abrupt change in culture, language, values, and social roles during migration disrupts a person's internal identity [13]. Individuals who find themselves in a culturally alien environment, in particular, feel like they "do not belong anywhere." This state can lead to feelings of worthlessness, mental exhaustion, psychosomatic symptoms, and even schizoid spectrum disorders [14].

A study published in the Journal of Positive Psychology in 2025 found that migrants who could not find their place in a multicultural environment experienced increased depressive and neurotic symptoms associated with the loss of personal identity [15]. Research shows that when psychological adaptation strategies (e.g., intercultural counseling, community integration programs) are not helpful during an identity crisis, this situation leads to long-term negative psychological consequences [16].

3. Culture shock and language barriers negatively affect psychological balance

During the process of migration, a person finds himself in a completely new environment not only physically, but also culturally, socially, and linguistically. It is these changes—culture shock and language barriers—that are considered one of the main risk factors for psychological stability [1]. These situations slow down the adaptation process, create difficulties in self-understanding, increase stress levels, and lead to mental health disorders [2].

Psychological mechanisms of culture shock

Culture shock is a psychological shock caused by a sudden change in the values, norms, rules of social communication, and habits of a person who has entered a new culture [3]. A 2020 study published in the Journal of Affective Disorders found that more than 61% of people who moved to a new area experienced symptoms of culture shock (anxiety, distrust, uncertainty, social withdrawal) within the first 3 months [4].

Culture shock typically goes through 4 stages:

Honeymoon phase

Frustration stage

Adjustment stage

Acceptance stage [5]

If a person goes through these stages without adequate social or psychological support, this shock can develop into chronic depression [6].

Language barriers and communication isolation

Lack of knowledge of the language is the main factor causing psychological and social isolation among migrants [7]. Language is not only a means of communication, but also a key tool in important aspects such as social integration, finding a job, accessing health services, and understanding the culture [8]. A 2023 study found that language barriers increased the risk of depressive symptoms by 2.7 times among immigrants in Australia [9].

Communication barriers in migrants:

Social withdrawal and loneliness [10]

Loss of self-confidence [11]

Increased internal psychological pressure due to the inability to express oneself [12]

Inability to communicate clearly about health problems and therefore increased stress [13]

Many studies show that language barriers lead to negative consequences, such as people not being able to access health services, not seeking legal services, and being excluded from social activities [14].

Cultural discrimination and “feelings of alienation”

In a new cultural environment, people often feel like “second-class citizens.” This can be related to cultural exclusion, racial or religious stereotypes, discrimination, lack of language skills, and differences in appearance [15]. A 2021 article published in the International Journal of Intercultural Relations described this condition as “internal alienation syndrome,” which proved that it leads to chronic anxiety, identity crisis, and depression [16].

Lack of cultural bridges — a factor that slows down adaptation

The lack of guidance (mentors, translators, intercultural coordinators) in a cultural environment also slows down the adaptation process [17]. In this case, the person feels as if they are living in a “consciously alienated” society — which increases social anxiety, psychosomatic disorders, and negative views of themselves [18].

A 2025 article published in Springer called this condition “structural alienation trauma” and found that depression and anxiety rates, especially among young migrants, are close to 60% [19].

Discussion

The study analyzed the psychological consequences of migration in a wide range and noted that this condition is not universal, but rather contextual. That is, the level of psychological stress varies depending on the person’s age, gender, social status, level of education, reasons for migration, and level of acceptance in the new society. Psychological vulnerability among women and children can lead to chronic depression if not reinforced by ongoing social support systems. In addition, the inability to communicate in the language, access to health care or legal systems can lead to a person feeling like an "alien".

Conclusion

Changing one's place of residence, whether voluntary or involuntary, is a complex process that leaves a deep mark on a person's mental state. The study shows that:

Post-migratory stress syndrome (PMSS) that occurs after migration poses a serious threat to overall mental health.

Women, children and the elderly are the most vulnerable groups to psychological impact.

Culture shock, language barriers, and social isolation disrupt psychological balance.

In such cases, social support networks, psychological counseling, and culturally adapted adaptive strategies act as the main defense mechanisms.

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