

Influence of Interpersonal Relationship and Mental Health among Young Indian Expats

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Abstract— Mental health of expats is very important factor as they are living away from home and family. Expats are someone who stays away from home and family, so there will be chance of different problems. Studies suggest depression is more prevalent among expats than those living at home. During the travelling restrictions and social distancing related to corona virus pandemic, many of expats are locked up in different countries which may lead them to stress and the expats may feel isolated without socialising– a feeling that can lead to mental health issues. Many of expats also suffer from sudden job loss which lead to financial stress& sleep issues. We should take a look at the expats mental health and the importance of getting the help you need if you're experiencing expat problems'. Interpersonal relationships have role in mental health issues as if a person have a good relationship whether it's a friendship or love relationship the person may not feel isolated in situations where he or she need a mental support. This research study aims to find out the relationship of mental health issues and inter-personal relationships among the expat population. Objectives of this study were to find the relationship between mental health issues and interpersonal relationship and to find out if there are any gender differences among men and women in the levels mental health issues and interpersonal relationship. 60 members from expat population aged between 20-35 have been considered for the study. To conduct this research two standardized scales were used, that is the collected data were analysed in a quantitative manner using statistical measures. Co-relation statistics was used to find the relationship between the variables and t-test was used to find out the gender differences.

Index Terms: Interpersonal Relationship, Mental Health, Young Indian Expats

INTRODUCTION

Human beings are social by nature. The connections we build with others are critical to social, emotional, and physical health. Knowing how to maintain

interpersonal relationships can help you build a support system that provides strength as you cope with life's challenges.

There is a well described relationship between social networks and mental health. Those with few social contacts are known to be at a greater risk from mental health problems.

The significance of inter-personal relationships to mental health is widely recognised academics writing from different perspectives on mental wellbeing all appear to agree on the importance of positive inter-personal relationships. The capacity for mutually satisfying and enduring relationships has been identified as a key aspect of good mental health (World Health Organization et al., 2004) The development of attachment in early life and maintenance of positive relationships with self, intimate others, and strangers are also held to be important determinants of mental wellbeing (Bowlby, 1969; Fonagy and Higgitt, 2000) and negative relationships characterised by a lack of respect, or by distrust may also be an important precipitating factor in violence and an independent predictor of mental health problem. Over the course of the last 25 years, published reports have suggested that living overseas as an expatriate conveys risk for stress and psychological or psychosocial problems that exceed those in populations for individuals living in their home country. The vast majority of these accounts are anecdotal, case reports, or autobiographical histories of living overseas. Some have suggested that expatriates are at high risk for adjustment and affective disorders, depression and anxiety, marital and substance abuse. While there have been a range of authors who have suggested that the rates of expatriate mental health problems are higher than their counterparts living at home, there has been virtually no empirical examination of whether

expatriates living overseas do, in fact, experience higher levels of stress or risk for mental health problems. The current study addresses this issue.

In one of the few studies documenting mental health risk in expatriates living over-seas, Valk conducted clinical evaluations for the U.S. military and government personnel stationed in Egypt and found rates of depressive disorder and substance abuse at 17.5% and 12.7%, respectively. Black & Gregersen suggest that adjustment and mental health problems are more pronounced when there is a significant cultural difference between one's home country and the host country. The adjustment to a new country is also more difficult when the ex-patriate worker and his/her family fail to receive training and support before, during, and after an assignment. Other factors that may influence adjustment overseas include language differences, and general expectations

MENTAL HEALTH

Mental health is "a state of well-being in which the individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community", according to the World Health Organization (WHO). Mental health includes subjective well-being, perceived self-efficacy, autonomy, competence, intergenerational dependence, and self-actualization of one's intellectual and emotional potential, among others. According to modern psychology Mental health includes our emotional, psychological, and social well-being. It affects how we think, feel, and act. It also helps determine how we handle stress, relate to others, and make choices. Mental health is important at every stage of life, from childhood and adolescence through adulthood.

From the perspectives of positive psychology or holism, mental health may include an individual's ability to enjoy life and to create a balance between life activities and efforts to achieve psychological resilience. Cultural differences, subjective assessments, and competing professional theories all affect how one defines "mental health". Some early signs related to mental health problems are sleep irritation, lack of energy and thinking of harming yourself or others. The focus of the PERMA Theory of well-being (Seligman, 2011) is helping people to

thrive. It promotes building skills that allow one to flourish (Positive Psychology Center, n.d.). Many contemporary theories attempt to help a person reduce suffering. PERMA theory of well-being states that well-being consists of five elements: They are

- Positive emotion
- Engagement
- Relationships
- Meaning
- Achievement

The expats are the persons who are connected with two countries, living country and home country and so they must be alert about countries economic status and development. The availability of banking access and insurance and other basic financial facilities are also not accessible for normal migrants as some countries in middle east is providing accounts on basis of salary statement, if one worker is not getting norm salary scale for holding an account they are not allowed to open an account. So most of them have a greater fear of future financial planning, due to fear of losing their job at any time as they are not given any guarantee regarding fixed-job, high living cost, Retirement life, dissatisfaction in job sector, home country house hold expenses, etc. there for the mental wellbeing will be less in case of migrants as they may face difficulties to stay away from home and they cannot return to home country as they want to meet financial needs of family.

The unique, and often unexpected pressures associated with living abroad can come as shock, which could lead to mental health issues, stroke and depression, stoked by feelings of isolation – which, in turn, can stem from a fear of confiding in other expats or loved ones back at home. It is especially common among expat spouses (women), who feel lonely when they follow their partner to a new country without having a job and new friends around. Being an expat abroad is unbelievable happiness, but expat life can give challenges as your family at home is not familiar with. The good news is that mental health issues is highly treatable in most of the case, so there is no need to struggle alone.

INTERPERSONAL RELATIONSHIPS

Interpersonal relationships are social associations, connections, or affiliations between two or People.

Interpersonal relationships vary in their degree of intimacy or self-disclosure, but also in their duration, in their reciprocity and in their power distribution, to name only a few dimensions. The context can vary from family or kinship relations, friendship, marriage, relations with associates, work, clubs, neighbourhoods, and places of worship. Relationships may be regulated by law, custom, or mutual agreement, and form the basis of social groups and of society as a whole. Interpersonal relationships are created by people's interactions with one another in social situations. Association may be based on inference love, solidarity, support, regular business interactions, or some other type of social connection or commitment. Interpersonal relationships thrive through equitable and reciprocal compromise; they form in the context of social, cultural and other influences.

The study of interpersonal relationships involve several branches of the social sciences, including such disciplines as communication studies, psychology, anthropology, social work, sociology, and mathematics. interpersonal relationships, two participants are interdependent, where the behavior of each affects the outcomes of the other. The individuals interact with each other in a series of interactions that are interrelated and affect each other. Individuals forms many different kinds of relationships with other people, some of which are intimate and close (e.g., parent-child, spouse-spouse, friendships) and others which are not intimate and close (e.g., neighbour, teacher-student). Most of the research on interpersonal relationships has focused on those relationships that are close, intimate, and have high interdependence. In an influential book, Kelley and colleagues (1983) define a close relationship as one that is strong, frequent, and with diverse interdependence that lasts over a considerable period of time. In sociology, although the classic distinction between primary and secondary relationships has been expanded in the public realm (fleeting, routinized, quasi-primary, and intimate secondary relationships), these close relationships also can be categorized as primary groups, which provide support and nurture and socialize individuals to the norms of society. There's no single cause for mental health issues. It can occur for variety of reasons and it has many different triggers. Different causes can often combine to trigger mental

problems like. stress and depression. For example, you may feel low after being ill and then experience a traumatic event, such as a bereavement, which brings on depression. Your environment and interpersonal relationship had huge impact on mental well being. Relocating abroad for work requires significant energy, confidence and optimism, which may be why expats and their spouses with the resourcefulness will take initiative to move. Moving to another country comes with a long list of stressors. In addition to cultural changes and language barriers, expats are often required to rely extensively on locals to help them navigate the simplest of tasks – from buying medicine at the pharmacy to signing a lease – something that over time can damage one's sense of competency. You might start to feel less independent. Selmer. J & Leung S.M (2020) had studied about adjustment nature of male and female expatriates in Hong Kong and it shows males have better adjustment than women which clearly depicts men is having better mental health for adjusting to a new country.

Leung S.M & Selmer (2007) have found out that women face much stress problems as expatriates and females are using more symptom focused stress coping methods than men.

Work life and family life is better handled by females than male expats. The study was conducted in Australian expatriates by Fischlmayr. C & Kollinger (2010). Another study by Alicia and Selmer (2003) clearly illustrates that more determined the women are to pursue better career as expatriate worker than men.

A research study by Paula and Mila (2011) conducted a study on the influence of social interaction and interpersonal relationships forming by women is good or bad and they identified several factors which supports women in building better interpersonal relationship in residing country.

The organizational cultural intelligence aided male employees shows heightened commitment towards co-workers and organization better than women in working place whereas females are more family oriented and less satisfied than men. The study was explained by David .M & Volpone. D (2019).

The studies by Ciechanowski et al., (2005); Kenny et al., (2013); Martin & Dowson, (2009); says that Having healthier relationships lead to an improvement in overall well-being. Maintaining

healthy interpersonal relationships with other people has been found to improve psychological health and well-being. Poor social connections and support from others have been associated with stress and affect mental health negatively.

An article by E. Taylor et al. (1989) found that interpersonal communication showed statistical significance between male and female administrators in a university environment. Using the FIRO-B questionnaire, females preferred to initiate more inclusion and affection in interpersonal activities; also, they wanted other people to include them and to be friendly to them in inter-personal relationships.

Poor or unsatisfying interpersonal relationships are associated with more emotional distress in adolescence, higher rates of depression and stress, and less motivation and engagement in school (Ciechanowski et al., 2005; Kenny et al., 2013; Martin & Dowson, 2009; Schutte et al., 2001; Stewart-Brown, 2005; Stoetzer et al., 2009; Zlotnick et al., 2000). Contrastingly, strong or satisfying interpersonal relationships often correlate with better social and emotional development, lower emotional distress, and higher overall happiness (Ciechanowski et al., 2005; Kenny et al., 2013; Martin & Dowson, 2009; Schutte et al., 2001; Stewart-Brown, 2005; Stoetzer et al., 2009; Zlotnick et al., 2000).

The significance of inter-personal relationships to mental health is widely recognised writing from different perspectives on mental wellbeing all appear to agree on the importance of positive inter-personal relationships. The capacity for mutually satisfying and enduring relationships has been identified as a key aspect of good mental health (World Health Organization et al., 2004). The development of attachment in early life and maintenance of positive relationships with self, intimate others, and strangers are also held to be important determinants of mental wellbeing (Bowlby, 1969; Fonagy and Higgitt, 2000) and negative relationships characterised by a lack of respect, or by distrust may also be an important precipitating factor in violence and an independent predictor of mental health problems (Stewart-Brown, 2005).

Black & Gregersen (1999) had conducted a study on how to manage expats mental health and suggest that adjustment and mental health problems are more seen when there is a significant cultural difference between one's home country and the host country.

The adjustment to a new country is also more difficult when there are many changes from the living country. Carpenter, Li and Jiang (2012) found that the literature on relationship building tends to use social network theory or social capital perspective to examine intra-organization relationships such as the influence of social network structure or network content on knowledge transfer and sharing within the organization's network and hence reduce mental stress.

A study by Kenny R et al (2012) had researched on the topic interpersonal relationship and emotional distress. This study revealed even though there are high levels of satisfaction in interpersonal relationships were predictive of low levels of emotional distress whereas high level of criticism exclusion also detected.

RESEARCH GAP

- There are only limited studies regarding the topic of interpersonal relationship and mental health among Young Indian Expats.
- This area of study can be used to enhance the mental wellbeing of Young Indian Expats
- There are only few studies among Young Indian Expats of age between 20-30
- This research study will contribute to future for supporting all migrant population.

In this study an attempt has been made to see the influence of interpersonal relationships and mental health among Indian Expats.

OBJECTIVES

- To assess the level of mental health among young Indian Expats
- To study the level of interpersonal relationship among young Indian Expats
- To see the relationship between Interpersonal relationship and mental health among young Indian Expats.
- To evaluate the gender differences in mental health among young Indian Expats.
- To determine the gender differences in interpersonal relationship among young Indian Expats.

Hypotheses

- There will be no relation of mental health among young Indian Expats
- There will be no significance of interpersonal relationship among young Indian Expats.
- There will be no relationship between interpersonal relationship and mental health among young Indian Expats.
- There will be no gender differences in mental health and interpersonal relationship among young Indian Expats.

METHODOLOGY

Sample:

50 Indian Expats will be taken for the purpose. 25 will be male participants and other 25 will be female participants.

Inclusion criteria:

- Indian Expats aged between 20-35 years will be studied.
- Both male and females are included in this research study.
- The research population should be graduated at least of 10th grade
- Participants are taken from middle socio economic status
- Samples are collected from rural area.

Exclusion criteria:

- No participant has been taken whose age is below 20 years and above 30 years.
- No participant has been taken whose academic level is below 10th grade.
- No participant has been taken who is below or above middle socio-economic status.
- No participant has been taken who does not belong to rural area

Tools

- Mental health inventory(MHI) developed by C.T Veil and J.E. Ware, Jr. (1983)
- Interpersonal relationship inventory-FIAT-Q SF developed by Callaghan (2006)

Procedure:

The participants of present study were approached through message and emails. They were given

assurance of giving confidentiality about their responses, the tools were administered to them. Before administering the tools in specific instruction which are mentioned have been classified to them. When the participants were cleared about all the doubts, they were asked to fill up the questionnaire. After getting their responses, tools were tabulated and proper statistics like mean, S.D, t test and correlation were computed. From the results, interpretation was made and conclusion were drawn.

Analysis of data:

Analysis of data was done through proper statistical procedures like mean, S.D, t test and correlation. The data were analysed through SPSS.

RESULT

Table 1

Tabular presentation of the data of male young Indian expats in mental health inventory and interpersonal relationship inventory

S. No	Score of Mental health inventory	Score of interpersonal relationship inventory
1	31	21
2	24	24
3	32	17
4	33	22
5	36	21
6	34	21
7	43	16
8	48	16
9	38	22
10	37	25
11	30	6
12	31	23
13	47	16
14	33	22
15	37	23
16	31	25
17	38	20
18	37	25
19	41	24
20	54	30
21	30	10
22	36	6
23	35	6
24	38	26
25	40	16
Mean	36.56	19.32
S.D	6.50	6.53

Table 2:

Tabular presentation of the data of female young Indian expats in mental health inventory and interpersonal relationship inventory.

S. No	Score of Mental health inventory	Score of interpersonal relationship inventory
1	31	18
2	32	21
3	40	24
4	45	18
5	47	16
6	38	22
7	41	24
8	33	24
9	41	21
10	41	20
11	51	17
12	34	21

13	32	12
14	34	26
15	33	20
16	45	22
17	38	26
18	30	6
19	27	26
20	28	21
21	36	22
22	53	18
23	44	19
24	39	24
25	39	24
Mean	38.08	20.48
S.D	6.87	4.54

Table 3: Tabular representation of the comparative analysis of mean, S.D, t-test and Correlation

Dimensions		Mean (M)	SD	t-value	Remarks	Correlation	Remarks
Mental health	Male	36.56	6.50	1.67	Not significant	0.162	Not significant
	Female	38.08	6.87				
Interpersonal Relationship	Male	19.32	6.53	2.009	Significant at 0.05 level	-0.55	Significant at 2 tailed
	Female	20.48	4.54				

DISCUSSION

From the results, it has been found that the Mean of females is slightly higher than the Mean of males in the domain of Mental health among young Indian expats, (Mean of males=36.56<Mean of females=38.08)). So, it may be inferred that the males have shown less proneness to mental health compared to female expats. From SD values, it has been seen that female expats showed more variability than the male expats (Female SD=6.87> Male SD=6.50). The t-value (1.67) has not been found statistically significant which indicates that the difference between the mean scores of the males and females of young Indian expats is due to chance factor. The correlational value is 0.162 has not been significant which implies that the relationship between the scores of male and female subjects is not statistically significant.

The results of this dimension are found in line with other research studies by (Fischlmayr.C & Kollinger (2010). Contrary to this study there are indirect indications from previous studies that men expats are better in case of mental health than women expats (Selmer. J &Leung S.M 2020 & 2007). In the present study, male subjects show less stable in mental health

may be attributed to the psycho-socioeconomic factors of their life.

From the above table, it pinpoints that the Mean of males is slightly lesser than the Mean of Females in case of interpersonal relationship among young Indian expats, (Mean of males=19.32<Mean of females=20.48)). So, it infers that the male expats have shown less interest in case of interpersonal relationship compared to female expats. From SD values, it has been delineated those female expatsshowed less variability than the male expats (Female SD=4.54 < Male SD=6.53). The t-value (2.009) has been found significant at 0.05 level which implies the difference between the scores of male and female subjects is statistically significant. The correlational value (0.55) has been found significant at 0.05 level, which denotes the relationship of the scores of male and female subjects is statistically significant.

The results of this domain are found in line with the previous research studies by Paula and Mila (2011) and David .M& Volpone. D (2019). Contrary to this study, there are research findings which suggest that male expats are better in case of relationship than women expats (E. Taylor et.al 1989). The nature of the present result may be inferred in such a way that male subjects have to face more problems in

interpersonal relationship due to the characteristics of their job and other adjustments in life compared to the female subjects.

The results indicate that the male subjects have shown lesser prominence in mental health and interpersonal relationship compared to their female counterparts. This may be due to their nature of job and their stress in making relationships with others. In case of interpersonal relationship, the difference between the mean scores and the correlation have been found statistically significant.

CONCLUSION

From the above results, it may be concluded that male subjects showed less prominence in mental health and interpersonal relationship. In case of interpersonal relationship, the null hypothesis has been rejected and alternative hypothesis has been accepted. In mental health, the null hypothesis has been retained.

Therefore, in this small segment, the relation of different variables interpersonal relationship and mental health have been observed among male and female expats. Hence, psychological and social correlation studies have been observed among male and female expats. Therefore, the title of the study is very much apt and justified.

SUGGESTIONS

1. From the findings the relationship of those variables has been established. Counselling is a good procedure to cater these problems and overcome it.
2. It may also be assessed that other type of psychotherapies like free association, cognitive behavioural modification can also be applied to them.
3. Informal or family members can also be counselled to get a comprehensive result on the dimension of mental wellbeing

LIMITATIONS

1. More variables could have been taken to explore other correlates of male and female expats like, physical health and other cognitive correlates.

2. More subjects could have been taken in these domains so that a board spectrum of result could have come out.

IMPLICATIONS

The findings of the present study will be helpful to make an overall management framework in mental healthcare intervention of expats.

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