



RESEARCH PAPER

Impact of Domestic Migration Stress on Mental, Social and Emotional Well-Being of the Adults Residing in the Families of the Military Personnel

Khadija Ghazanfar¹ Dr. Muhammad Naveed Riaz² Dr. Shazia Shahzadi³

1. BS Psychology, Department of Psychology, University of Sargodha, Sargodha, Punjab, Pakistan
2. Assistant Professor, Department of Psychology, University of Sargodha, Sargodha, Punjab, Pakistan
3. Assistant Professor, Head Speech Pathology and Audiology, Department of Rehabilitation Science, Shifa Tameer-e-Millat University Islamabad, Pakistan

DOI

[http://doi.org/10.35484/pssr.2022\(6-II\)84](http://doi.org/10.35484/pssr.2022(6-II)84)

PAPER INFO

ABSTRACT

Received:

February 20, 2022

Accepted:

June 08, 2022

Online:

June 10, 2022

Keywords:

Adults

Domestic

Migration Stress,

Emotional

Wellbeing,

Mental Wellbeing,

Social Wellbeing

***Corresponding**

Author

naveed.riaz@uos.edu.pk

The study investigated the impact of domestic migration stress on mental, social and emotional well-being of the adults residing in the families of the military personnel. Moderating role of mental wellbeing between migration stress and its two outcomes including social and emotional wellbeing was investigated also. Research participants were adults residing in the families of the military personnel (N = 300), approached through purposive sampling to administer Domestic Migration Stress Questionnaire, Warwick Edinburg Mental Well-being Scale-Short Form, Social Well-being Scale and Emotional Well-being Scale. Moderation analysis indicates that for negative effect of domestic migration stress on social and emotional wellbeing, the moderator variable mental wellbeing played the role of antagonistic as the domestic migration stress enhanced both social and emotional wellbeing instead of reducing them. Thus, the negative effect of domestic migration stress on social and emotional wellbeing turned into positive due to the inclusion of mental wellbeing in adults.

Introduction

Migration is marked by leaving the place of origin. Sometimes in migration person has much planning and he has prepared himself for future and sometimes migration is not preceded by planning and person has not prepared himself for future (Gui et al., 2012). After the process of globalization, it has become very common among the people to migrate or shift themselves from one place to another. There are many reasons due to which people move themselves from one place to another. For their own interests people migrate from one area to another. People migrate to improve their standard of living. In migration people move from one area towards another area which is more developed. People do this so that they can get many new opportunities. When a migrant leaves its place and shift towards another place, he faces many problems in adjusting himself in the new place where he stays and where he works. Due to these problems a migrant faces a lot of stress (Berry et al., 2006).

Literature Review

In adolescent's migration also has negative effect on the mental health of the migrants. It was noticed that adolescents who migrate from one place to another are more involved in risk behaviors and they have more severe mental health issues (Nakash et al., 2012). Domestic migration stress has negative effect on social wellbeing of a person. The data was collected in Indonesia between 1993 and 2007 which showed that domestic migration had negative consequences on social wellbeing of a person. Domestic stress leads towards loss of social support and its effects on social wellbeing of a person (Aneshensel, 1992). The study was conducted whose findings indicated the negative effect of domestic migration on social wellbeing of a person and also showed the negative relationship between the migrants and left behind like spouses and parents left behind the migrants. It effects on social wellbeing of both migrants and the people left behind. Domestic migration is a social stressor with deleterious mental health effects (Amato, 2000). Domestic migration is causing negative effects on women's psychological wellbeing (Aneshensel & Pearlin, 1987).

Domestic migration is causing externalized expression of distress in men such as anger and domestic migration is causing internalized mental health problems in women such as depression (Greenglass & Burke, 1988). Domestic migration effects the mental wellbeing of a person and cause stress in a person (Parrenas, 2005). Migration causes extreme stress in a person and effects on social resources of a person due to which his social wellbeing is highly effected. The social network of a person is affected due to migration which has great influence on social wellbeing of a person (Kristiansen & colleagues, 2007). Migration causes psychological problems in an individual. The psychological health of a person is affected due to domestic migration (Burnet & Thompson, 2005). Domestic migration effects the interaction of individual and environment. In new environment the migrant is not able to interact with other people which causes social isolation and effects the social well-being of the migrant (De Maio & Kemp, 2010). Different researches showed the impact of domestic migration stress on social well-being of a person (Lunstad et al., 2010). The factors which effect the social well-being of a person is the connection of migrant with other members of society (Cheung, 2014). A study was conducted whose findings indicated that migration has more severe effect on females as compared to males. Because of peer group's pressure. So, it effect the social well-being of females (Fiorati & Carvil, 2015).

Migration has more effect on older people. Migration causes social isolation in old people and it effect the social well-being of older age people (Mou et al., 2013). After migration the social support of migrants is affected which effects the social well-being of a person (Zhou, 2012). Migrated people have many changes in their life after migration. These changes can be cognitive or affective. After migration satisfaction and happiness of the migrants is more necessary as compared to money or increase in their outcome (Diener et al., 2003). Migration causes stress in life of migrants but people migrate for many reasons. Some people migrate to bring positive changes in their life. Some people not only migrate to increase their income but they migrate to bring happiness in their life. Some people migrate to improve the quality of their life because they believe that if the change their place of residence this will-bring positive changes in their life. They believe that changing their place of residence will bring

happiness and improve their quality of life (McCollum, 1990; Magdol, 2002). Domestic migration also causes negative effects in the life of migrants. It has negative effects on subjective well-being of a person. There were different policies made who defined migration in the term of happiness not only money. It means that some people migrate to other cities and countries not for money but to bring happiness in their lives (Diener & Seligman, 2004).

It is not necessary that migration brings social well-being in the life of migrants but it also effects the social well-being of migrants (Florida, 2002). Sometimes after migration happiness is a temporary effect not a permanent effect. For sometimes after migration people feels happiness but after sometimes it starts to effect subjective wellbeing of a migrants negatively (Stratton, 2010). After migration there are many reasons which effect subjective well-being of a person. After migration unemployment destroyed the subjective well-being of a person. After migration if a person doesn't get a job, it decreases in the subjective well-being of migrants (Clark et al., 2008; Lucas et al., 2004). People migrate for many reasons. Some people migrate to improve their life styles. It also increases subjective well-being of a person. There were many researches whose findings indicated that after migration the chances of benefits reduces if the whole family migrate instead of one person. It also negatively effect on subjective wellbeing of a person. Family migration don't provide much benefits to males and females (Coulter & Van Ham, 2012; Mulder & Cooke, 2009).

Migration, in all forms (domestic or overseas) has significant negative impact on the wellbeing of adults. A good deal of research is conducted on the overseas migration due to wars and economic reasons. However, domestic migration stress has remained a less-researched topic. Afreen et al. (2020) pioneered the empirical work on domestic migration stress in Pakistan with reference to temporarily displaced persons TDPs (seasonal-induced TDPs and natural disaster-induced TDPs). Bibi (2020) extended the research on domestic migration stress and investigated the effects of domestic migration stress on the well-being of displaced families due to Orange Line Project in Lahore (development-induced displaced persons). The empirical work of the indigenous researchers remained limited to either natural / man-made disasters or normal seasonal displacements which occur regularly in the changing seasons and residents of high-altitude areas shift to low altitude areas every year in the winter season. Internal displacement due to disasters is exceptional and due to environmental changes is regular. Research on internal human geographical movement ignored a very important type of displacement due to military service. In their military career, military personnel along with their families have to face internal displacement for multiple times. Although it is a part of military service structure, but shifting from one place to another is a stressful experience, which is evident from existing scientific literature. This is the experience which is acknowledged in the literature as "domestic migration stress". Military personnel might absolve this stress or cope with this as they are well-trained because military service is a high-stress occupation when we classify stress in low, medium and high-stress occupations. On the contrary, wellbeing of families of the military personnel are at risk due to domestic migration stress. Adults residing in the military families have to face the problems of resettlement in the new areas (they have to change a settled-life) which disturbs their mental wellbeing, changes the dynamics of social life, friendships and social bonding lead to decreased social wellbeing and a

psychological place attachment with the place of origin disturbs their emotional well-being. The present study is being conducted to fill an evidence gap as the families of military personnel in terms of the effect of domestic migration stress on mental, social and emotional wellbeing is the main focus of the present study.

Material and Methods

To present study is focused to examine the impact of domestic migration stress on mental, social and emotional well-being of the adults residing in the families of the military personnel. The present research is based on cross-sectional survey research design.

Sample

A sample of military personnel's (N=300) with range from 18 to 30 years (M = 1.48, SD = .501) was collected from adults residing in the families of the military personnel. Thus, a total sample 300 adults participated in study. Equal number of men (n = 150, 50%) and women participated in study (n = 150, 50%). Greater number of adults with 1-20 months length of stay (n = 111, 37%) participated in the study as compared to adults with 21-30 months (n = 57, 19%), 31-40 months (n = 51, 17%), 41-50 months (n = 36, 12%) and 51-60 months (n= 45, 15%). Greater number of adults from BS / MA / MSc (n = 145, 48.3%) participated in the study as compared to matric (n = 41, 13.7%), FA / F. Sc (n = 51, 17%), BA / BSc (n = 41, 13.7%), MS / MPhil (n = 22, 7.3%). Research on the construct of "domestic migration stress" can be conducted on the individuals with the experience of "domestic migration" (shifting from to place to another, within the same country). Existing researchers investigated all types of internally displaced persons but the families of military personnel that face frequent domestic migrations in the form of postings were not investigated. Thus, the present study has focused the focused families of military personnel to bridge this evidence gap. Power analysis through g-power confirmed that sample size was adequate for conductive analysis in the present study. The data collection was done from the province of Punjab, KPK, and Sindh. Data were collected using purposive sampling technique. During the selection of the sample from participants at least 1 month length of stay in particular city/ was ensured as inclusion criteria. Members of military families other than early adulthood were excluded from the study. Military family members having military service were also excluded from the study.

Instruments

Domestic Migration Stress Questionnaire

This scale was developed by Chen et al. (2015). This scale contains 16 items including four sub constructs and per sub construct also include 4 items. The four sub constructs are (1) Separation from the place of origin, assessing stressful responses associated with leaving home; (2) Rejection in the destination, measuring the perceived discrimination, isolation, and opportunity deprivation; (3) Lack of self-confidence, evaluating stresses due to the lack of confidence and competence in adapting to the new environment; and (4) Maladaptation, measuring stressful and frustrated feelings associated with difficulty or failure to adapt to the new environment. Domestic migration stress scale is based on positively coded statements

such as “craving for family members, relatives and friends from my hometown to come and visit”. The scale format is five-point Likert scale for evaluation of frequency of events never = 1, rarely = 2, sometimes = 3, often = 4, always = 5. Minimum-maximum scores on the overall scale are 16 to 80. Minimum maximum scores of the subscales are 4 to 20. Lower and higher scores (representing lower a higher level of domestic migration stress). This scale has reliability with (Cronbach alpha = .93). Authors reported factorial, convergent and discriminant validity of the scale.

Warwick Edinburg Mental Well-being Scale-Short Form

The scale was developed by Tunnet et al. (2007). The scale was designed to measure mental wellbeing in adults. The scale is made up of 7 items. Mental wellbeing scale is based on positively coded statements such as “I have been feeling optimistic about the future”. Format of the scale is 5-point Likert-type scale with response categories none of the time = 1, rarely = 2, some of the time = 3, Often = 4, and All of the time = 5. Minimum score on the overall scale is 16 and maximum score is 80. Student along with general population samples, and also focus groups are involved in validation. The scores of the scale interpreted as lower and higher scores representing lower and higher level of a mental wellbeing. The reliability of this scale is .83. Authors reported factorial, convergent and discriminant validity of the scale.

Social Well-being Scale

The scale was developed by Keyes. (1998). This scale contains 15 items including 5 sub constructs and per sub construct include 3 items. The instrument is made up of five different sub constructs such as social acceptance, social coherence, social actualization, social integration, and social contribution. Social wellbeing scale is based on positively coded statements such as “I believe that people are kind”. The scale is based on seven-point Likert-type with response categories strongly disagree = 1, agree = 2, somewhat disagree = 3, neutral = 4, somewhat agree = 5, Agree = 6, strongly agree = 7. Minimum score on the overall scale is 15 and maximum score is 105. Minimum score on each sub construct is 7 to 21. The scores of the scale interpreted as lower and higher scores representing lower and higher level of social wellbeing. Most of these parts hold a reliability with Cronbach’s a .60 to .70. Valid on both student and general population samples, and focus groups. Authors reported factorial, convergent and discriminant validity of the scale.

Emotional Well-being Scale

The scale was developed by Shermila and Portia (2015). This scale was designed to measure emotional wellbeing in adults. The scale consisted of 26 items with 4 sub constructs. The sub constructs are mental health, emotional resilience, emotional health and emotional happiness. Mental health contains 7 items, emotional resilience contains 5 items, emotional health contains 9 items and emotional happiness contain 6 items. Emotional wellbeing scale is based on both positive and negative coded statements such as “I consider myself as an important member of society” and if it happen to hear someone speaks ill of me, I am depressed for days. This is 3-point Likert type scale with response categories disagree=1, undecided=2, agree=3. Minimum-maximum scores on the overall scale are 26 to 78. Minimum and maximum score on mental health is 7 to 21, emotional resilience 5 to 15, emotional

health 9 to 27 and emotional happiness 6 to 18. The scores of the scale interpreted as lower and higher scores representing lower and higher level of emotional wellbeing. Most of these components possess an acceptant reliability containing Cronbach's Alpha values varies from 0.75 to 0.864. Authors reported factorial, convergent and discriminant validity of the scale.

Ethical Consideration

Ethical codes of conduct in the psychological research were strictly followed in the research. The research was based on the family members of military personnel residing in garrisons. Although the researcher collected information through personal contacts but still most of the families provided information conditionally that their identities will never be disclosed. Thus, keeping in view these concerns, the identifying information e.g., name, garrison name, city name was not mentioned on the scales. Thus, in this was the anonymity was ensured. Participants were excommunicated that their information will remain confidential. Besides this assurance, data was kept under lock and key and no one accessed it except supervisor. They were also clearly mentioned that they can withdraw their data whenever the wanted. All participants signed informed consent. Deception was not involved in the research. With all these ethical considerations, the research proposal was reviewed and approved by the departmental Board of Studies (BoS).

Results and Discussion

The present study aimed to examine the effect of domestic migration stress on mental, social and emotional well-being of adults residing in military families. Data analysis was carried out using SPSS-25.

Table 1
Psychometric Properties and Pearson Correlation in Variables

1.	Scales	M	SD	Range	Cronbach' α	1	2	3	4
1.	Domestic Migration Stress Questionnaire	12.23	3.57	4-20	.76	-	-.43***	-.24***	-.13*
2.	Warwick Edinburg Mental Well-Being Scale	21.67	4.98	10-34	.72			.18**	.30***
3.	Social Well-Being Scale	11.32	3.01	4-20	.74				.20**
4.	Emotional Well-Being Scale	57.39	5.87	35-78	.72				

The Cronbach's α value for Domestic Migration Stress Questionnaire, Warwick Edinburg Mental Well-Being Scale, Social Well-Being Scale and Emotional Well-Being Scale were .76, .72, .74, and .72 ($> .70$) which indicated satisfactory reliability of all scales administered on faith groups. Results show that domestic migration stress has negative correlation with mental well-being ($r = -.43, p < .001$), social well-being ($r = -.24, p < .001$) and emotional well-being ($r = .13, p < .05$). Mental well-being has positive correlation with social well-being ($r = .18, p < .01$) and emotional well-being ($r = .30, p < .001$). Social well-being has positive correlation with emotional well-being ($r = .20, p < .01$).

Table 2
Moderation of Mental Well-Being between Domestic Migration Stress and Social and Emotional Well-Being

Predictors	Model 1			Model 2			Outcome
	B	B	SE	B	B	SE	
Constant	11.32***		0.17	11.12***		0.18	[1] Social well-being
Domestic migration stress	-0.59**	-0.20**	0.19	-0.51**	-0.17**	0.19	

*Impact of Domestic Migration Stress on Mental,
Social and Emotional Well-Being of the Adults Residing in the Families of the Military Personnel*

Mental well-being	0.29	0.10	0.19	0.28	0.09	0.19
Domestic migration stress x mental well-being				-0.47**	-0.16**	0.16
R ²	.06			.09		
ΔR ²				.03		
Constant	57.39***		0.33	57.03***		0.35 [2]
	Emotional well-being					
Domestic migration stress	-0.05	-0.01	0.36	-0.09	-0.02	0.36
Mental well-being	1.32***	0.29***	0.36	1.69***	0.29***	0.36
Domestic migration stress x mental well-being				-0.83**	-1.15**	0.31
R ²	.08			.10		
ΔR ²				.02		

* $p < .05$. ** $p < .01$. *** $p < .001$.

[1] In Model 1, the R^2 value of .06 revealed that the domestic migration stress and mental well-being explained 6% variance in the social well-being with $F(2, 297) = 10.24, p < .001$. The findings revealed that domestic migration stress negatively predicted social well-being ($\beta = -0.20, p < .01$). In Model 2, the R^2 value of .09 revealed that domestic migration stress, mental well-being and domestic migration stress x mental well-being explained 9% variance in the social well-being with $F(3, 296) = 9.89, p < .001$. The findings revealed that domestic migration stress ($\beta = -0.17, p < .01$) and domestic migration stress x mental well-being negatively predicted social well-being ($\beta = -0.16, p < .01$). The ΔR^2 value of .03 revealed 3% change in the variance of model 1 and model 2 with $\Delta F(1, 296) = 8.67, p < .01$. [2] In Model 1, the R^2 value of .08 revealed that the domestic migration stress and mental well-being explained 8% variance in the emotional well-being with $F(2, 297) = 14.23, p < .01$. The findings revealed that mental well-being positively predicted emotional well-being ($\beta = 1.32, p < .001$). In Model 2, the R^2 value of .10 revealed that domestic migration stress, mental well-being and domestic migration stress x mental well-being explained 10% variance in the emotional well-being with $F(3, 296) = 12.09, p < .001$. The findings revealed that mental well-being positively predicted emotional well-being ($\beta = 0.29, p < .001$) and domestic migration stress x mental well-being negatively predicted emotional well-being ($\beta = -1.15, p < .01$). The ΔR^2 value of .02 revealed 2% change in the variance of model 1 and model 2 with $\Delta F(1, 296) = 7.21, p < .01$.

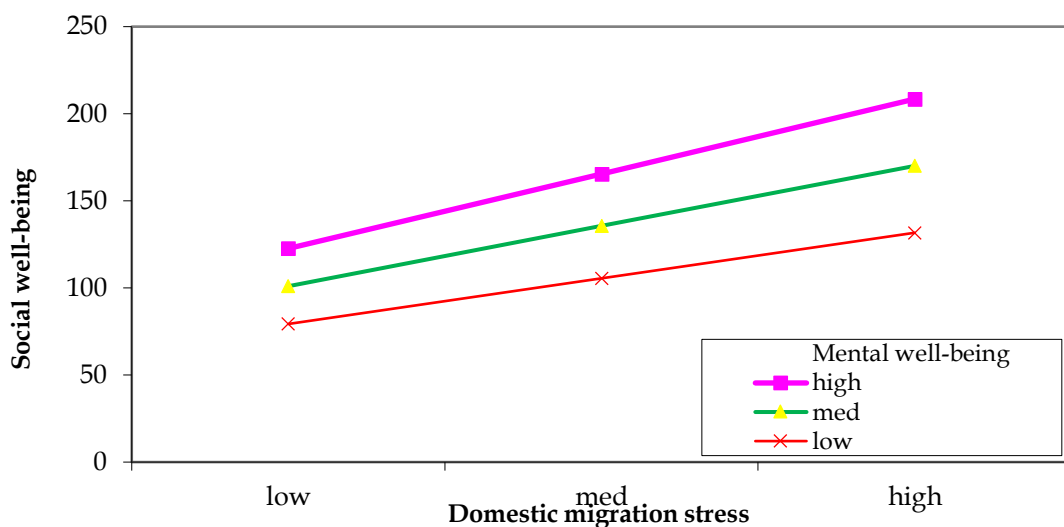


Figure 1 Mod-Graph Showing Moderation of Mental Well-Being between Domestic Migration Stress and Social Well-Being in Adults Residing in the Families of Military Personnel

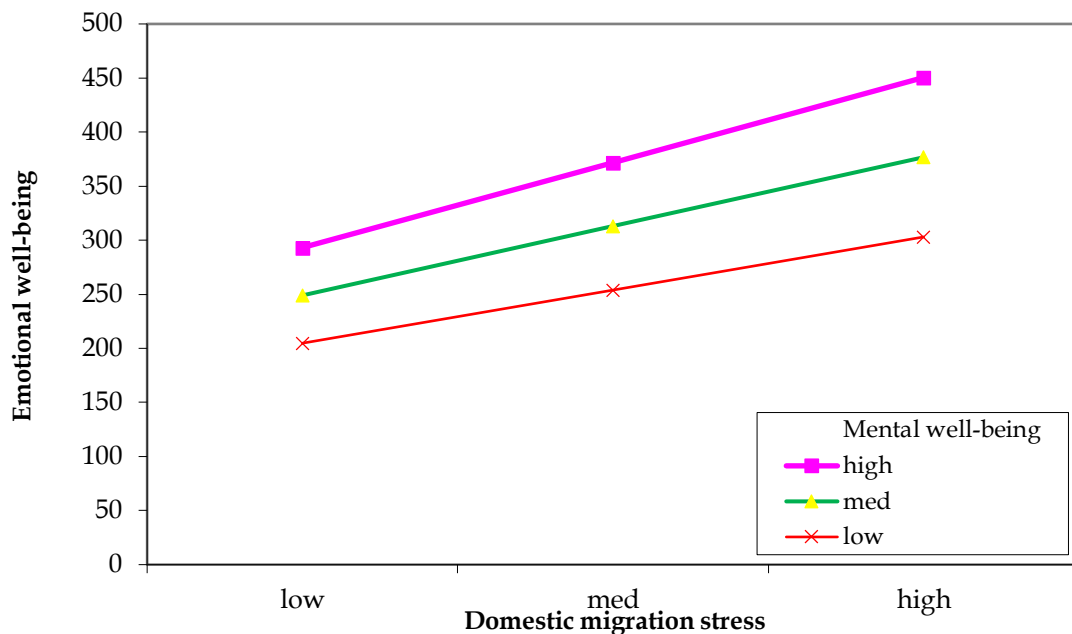


Figure 2 Mod-Graph Showing Moderation of Mental Well-Being between Domestic Migration Stress and Emotional Well-Being in Adults Residing in the Families of Military Personnel

Discussion

The first hypothesis “Domestic Migration Stress is likely to negatively predict mental well-being of military personnel as well as their families” was supported in this study. Military deployments in a few areas cause harmful effect on both person and his family setup. Domestic migration is a up to date, intricate process in which the main purpose of a person is looking for good or getting out from the undesired or undesirable factors. Although, migration is not always a stressful thing, but when we move with is no proper or mental preparations and no social assistance, then hurdles or difficulties and differences may occur, there will be definite stress and anxiety, no matter whether the migration is military, international or internal migration. Most of the time migration is a risky factor that develop Mental Health disturbances. Due to the feelings of insecurity and also absence of own community members, then in turn the stress would turn into mental health traumas or other forms of health problems. In adolescent’s migration, migrants experience negative effects on the mental health. It was observed that adolescents who migrate from one place to another are more involved in risk behaviors and have more severe mental health issues (Nakash et al, 2012).

The second hypothesis “Domestic migration stress is likely to negatively predict social well-being in adults residing in the families of military personnel” was supported in this study. The study was conducted whose findings indicated the negative effect of domestic migration on social wellbeing of a person and also showed the negative relationship between the migrants and left behind like spouses and

parents left behind the migrants. Its effects on social wellbeing of both migrants and the people left behind. Domestic migration is a social stressor with deleterious mental health effects (Amato, 2000). Migration causes psychological problems in an individual. The psychological health of a person is affected due to domestic migration (Burnet & Thompson, 2005). A research was done in migrants in Norway. The result of these findings indicated that migrants were more vulnerable to self- perceived discrimination because of lack of social support. Lack of social support effects the social well-being of a person. There are 3 types of social support for migrants. Social support by his family, social support by peer and outside. After migration the social support of migrants is affected which effects the social well-being of a person (Zhou, 2012). When our family members, relatives and friends provide social support to us then resilience and self-efficacy feelings may increase (Pietrzak et al., 2010), This may help couples to accept the elements that are creating stress in more positive sense (e.g., Bartone, 2006). Adding to this, companion social assistance may also help the couples to reduce the feeling of loneliness during husband deployment. However, when social assistance coming from husband, the military partner helps in comforting the spouse as well as helps in perceiving military life meaningful and less stressful. Moreover, all these social assistances can motivate or encourage to use coping strategies that are more adaptive. Friend social assistance was not meant to be an important predictor of well-being. Domestic migration surely effects the interaction of individual and his environment. In totally new environment the migrant is unable to interact with others which causes social isolation and effects the social well-being of the migrant (De Maio & Kemp, 2010).

The third hypothesis “Domestic migration stress is likely to negatively predict emotional well-being in adults residing in the families of military personnel” was supported in this study. Stress and mental wellbeing are more important in military environment than in another context in determining performance, turnover intentions and health outcomes factors like these play a major role in this setting. After diligence of daily life in military, the negative effects slide into the family zone that are linked with high stressful experience of combat deployments. In military context studying emotions and wellbeing is very difficult indeed. The main and important point is that there is an organizational culture in military mark by hesitancy in showing their emotions or personal weakness due to this there is a challenge for mental health practitioners to get precise data and reliable results. Moreover, due to constant revolving in and out of combat environment, their emotional wellbeing changes over time rapidly. Many factors are contributing to the experience of stress and wellbeing make a detailed study but it is impossible to cover all the factors at once. According to a career website the most stressful job or occupation in 2013 year in US is military jobs. Staying away from home foe log period of times. Being in a public eye, physical danger, and physical demand, and responsible for other people lives are the part of this job. In US forces, high degree of mental disorders (19.7%) is linked with combat deployments and 13% is alcohol abuse (Fear et al., 2010). In current US report according to JMHAT state of depression and stress with acute trauma experienced in combat is 19.8% of some sort of psychological disorder reported by soldiers of America. In wars of Iran and Iraq over 2 million service members are deployed and it is not a surprise that US senior leadership has been actively participating in the research to promote emotional wellbeing. In service members decreased performance and negative outcome of host is the major cause of domestic migration stress and depression in military. The matter

bordering emotional wellbeing and stress in military is multiplex, but the main problem is ignored both directly and indirectly (Casey, 2011). Finally, moderation analysis indicates that for the negative effect of domestic migration stress on social and emotional wellbeing, the moderator variable mental wellbeing played the role of antagonistic as the domestic migration stress enhanced both social and emotional wellbeing instead of reducing them. Thus, the negative effect of domestic migration stress on social and emotional wellbeing turned into positive due to the inclusion of mental wellbeing in adults.

Conclusion

The present study investigated the Impact of domestic migration stress on mental, social and emotional well-being of adults residing in the families of the military personnel. The findings of this study concluded that domestic migration stress is negatively associated with mental well-being of adults residing in the families of military personnel. Which means the more a person experiences domestic migration stress, his mental well-being will be affected which in return have a detrimental effect on both individual and family functioning. Because during migration separation of parents from child causes many problems in child's development cycle. Moreover, this study concluded that domestic migration stress negatively associated with social and emotional well-being. As mental well-being of a person is affected by domestic migration stress due to which social and emotional well-being is also affected. It is concluded that increase of domestic migration stress causes decrease in social well-being because social support from family, civilian friends, and partner were significant predictors of better psychological health and lower levels of depression among military spouses so when it is decreases it causes psychological problems in individual. Domestic migration stress also causes decline in emotional well-being of individuals. Moreover, given the fact that service members are constantly rotating in and out of combat environments, there is an extremely high degree of variability in their reported emotional well-being over time. Because many factors affect the level of happiness and emotional well-being of migrant i.e., economic condition, health and work. Thus, all these factors are affected when a person migrate from one area to another area.

References

- Amato, P. (2000). The consequences of divorce for adults and children. *Journal of marriage and the family*, 62(4), 1269- 1287. <https://doi.org/10.1111/j.1741-3737.2000.01269.x>
- Aneshensel, C. S. (1992). Social stress: Theory and research. *Annual Review of Sociology*, 18, 15-38. <https://doi.org/10.1146/annurev.so.18.080192.000311>
- Aneshensel, C., & Pearlin, L. (1987). Structural contexts of domestic migration in stress. In: Barnett R, Bienerl, Baruch G, (Eds.), *Gender and stress*. (pp. 75-95). New York: Free Press.
- Arfeen, S., Riaz, M. N., & Riaz, M. A. (2020). Domestic Migration Stress and Delayed PTSD among Displaced Persons: Moderating Role of Health Protective Factors. *Pakistan Journal of Medical Research*, 59(3), 89-94.
- Bartone, P. T. (2006). Resilience under military operational stress: Can leaders influence hardiness? *Military Psychology*, 18, S131-S148. doi:10.1207/s15327876mp1803s_10
- Bibi, F. (2020). Domestic migration stress and mental health consequences among development induced TDPs: moderating role of personal factors (M.Phil dissertation). Department of Psychology, University of Sargodha, Sargodha, Punjab, Pakistan.
- Burnett, A., & Thompson, K. (2005). Enhancing the psychosocial well-being of asylum seekers and refugees. In K. H. Barrett, & W. H. George (Eds.), *Race, culture, psychology, & law* (pp. 205-224). SAGE Publications, Inc., <https://www.doi.org/10.4135/9781452233536.n14>
- Casey, G. W., Jr. (2011). Comprehensive soldier fitness: A vision for psychological resilience in the U.S. Army. *American Psychologist*, 66, 1-3.
- Chen, X., Yu, B., Gong, J., Zeng, J., & MacDone, K. K. (2015). The Domestic Migration Stress Questionnaire (DMSQ): Development and Psychometric Assessment. *Journal of Social Science Studies*, 2(2), 117-133. <https://ideas.repec.org/a/mth/jsss88/v2y2015i2p117-133.html>
- Cheung N. W. (2014). Social stress, locality of social ties and mental well-being: the case of rural migrant adolescents in urban China. *Health & place*, 27, 142-154. <https://doi.org/10.1016/j.healthplace.2014.01.013>
- Clark, A. E., Diener, E., Georgellis, Y., & Lucas, R. E. (2008). Lags and Leads in Life Satisfaction: A Test of the Baseline Hypothesis. *The Economic Journal*, 118(529). <https://doi.org/10.1111/j.1468-0297.2008.02150.x>

- Coulter, R., van Ham, M., & Feijten, P. (2012). Partner (dis)agreement on moving desires and the subsequent moving behaviour of couples. *Population, Space and Place*, 18(1), 16–30. <https://doi.org/10.1002/psp.700>
- De Maio, F. G., & Kemp, E. (2010). The deterioration of health status among immigrants to Canada. *Global public health*, 5(5), 462–478. <https://doi.org/10.1080/17441690902942480>
- Diener, E., & Seligman, M. E. P. (2004). Beyond Money: Toward an Economy of Well-Being. *Psychological Science in the Public Interest*, 5(1), 1–31. <https://doi.org/10.1111/j.0963-7214.2004.00501001.x>
- Diener, E., Scollon, C. N., & Lucas, R. E. (2003). The evolving concept of subjective well-being: The multifaceted nature of happiness. In P. T. Costa & I. C. Siegler (Eds.), *Advances in cell aging and gerontology*: (Vol. 15, pp. 187-220). Amsterdam: Elsevier.
- Fear, N. T., Jones, M., Murphy, D., Hull, L., Iversen, A. C., Coker, B., Machell, L., Sundin, J., Woodhead, C., Jones, N., Greenberg, N., Landau, S., Dandeker, C., Rona, R. J., Hotopf, M., & Wessely, S. (2010). What are the consequences of deployment to Iraq and Afghanistan on the mental health of the UK armed forces? A cohort study. *Lancet (London, England)*, 375(9728), 1783–1797. [https://doi.org/10.1016/S0140-6736\(10\)60672-1](https://doi.org/10.1016/S0140-6736(10)60672-1)
- Fiorati, R. C., & Elui, V. M. (2015). Social determinants of health, inequality and social inclusion among people with disabilities. *Revista latino-americana de enfermagem*, 23(2), 329–336. <https://doi.org/10.1590/0104-1169.0187.2559>
- Florida R. (2002). *The Rise of the Creative Class*. Basic Books, New York.
- Greenglass, E. R., & Burke, R. J. (1988). Work and family precursors of burnout in teachers: Sex differences. *Sex Roles*, 18(3-4), 215–229. <https://doi.org/10.1007/bf00287791>
- Gui, Y., Berry, J. W., & Zheng, Y. (2012). Migrant worker acculturation in China. *International Journal of Intercultural Relations*, 36(4), 598-610. <http://dx.doi.org/10.1016/j.ijintrel.2011.11.007>
- Holt-Lunstad, J., Smith, T. B., & Layton, J. B. (2010). Social relationships and mortality risk: a meta-analytic review. *PLoS medicine*, 7(7), e1000316. <https://doi.org/10.1371/journal.pmed.1000316>
- Keyes, C. L. M. (1998). Social well-being. *Social Psychology Quarterly*, 61, 121–140. <http://dx.doi.org/10.2307/2787065>
- Lucas, R. E., Clark, A. E., Georgellis, Y., & Diener, E. (2003). Reexamining adaptation and the set point model of happiness: Reactions to changes in marital status. *Journal of Personality and Social Psychology*, 84(3), 527–539. <https://doi.org/10.1037/0022-3514.84.3.527>

- Magdol, L. (2002). Is moving gendered? The effects of residential mobility on the psychological well-being of men and women. *Sex Roles: A Journal of Research*, 47(11-12), 553-560. <https://doi.org/10.1023/A:1022025905755>
- McCollum, A. T. (1990). In *The trauma of moving: psychological issues for women*. Essay: Sage, London.
- Mou, J., Griffiths, S. M., Fong, H., & Dawes, M. G. (2013). Health of China's rural-urban migrants and their families: a review of literature from 2000 to 2012. *British medical bulletin*, 106, 19-43. <https://doi.org/10.1093/bmb/ldt016>
- Mulder, C. H., & Cooke, T. J. (2009). Family ties and residential locations. *Population, Space and Place*, 15(4), 299-304. <https://doi.org/10.1002/psp.556>
- Nakash, O., Nagar, M., Shoshani, A., Zubida, H., & Harper, R. A. (2012). The effect of acculturation and discrimination on mental health symptoms and risk behaviors among adolescent migrants in Israel. *Cultural diversity & ethnic minority psychology*, 18(3), 228-238. <https://doi.org/10.1037/a0027659>
- Parrenas R. (2005). *Children of global migration: transnational families and gendered woes*. Stanford University Press.
- Pietrzak, R. H., Johnson, D. C., Goldstein, M. B., Malley, J. C., Rivers, A. J., Morgan, C. A., & Southwick, S. M. (2010). Psychosocial buffers of traumatic stress, depressive symptoms, and psychosocial difficulties in veterans of Operations Enduring Freedom and Iraqi Freedom: the role of resilience, unit support, and postdeployment social support. *Journal of affective disorders*, 120(1-3), 188-192. <https://doi.org/10.1016/j.jad.2009.04.015>
- Risher, M. (2007). *Report on the cycles of deployment: an analysis of survey responses from April through September, 2005*. <http://www.nmfa.org/>.
- Shermila, A. J., & Portia, R. (2015). Preparation and Validation of Emotional Well-being Scale. *International Journal of Informative & Futuristic Research*, 3, 927-937.
- Stratton, A. (2010). David Cameron aims to make happiness the new GDP. *The Guardian*, 14, 253-267.
- Tennant, R., Hiller, L., & Fishwick, R. (2007). The Warwick-Edinburgh Mental Well-being Scale (WEMWBS): development and UK validation. *Health Qual Life Outcomes*, 5, 63-67. <https://doi.org/10.1186/1477-7525-5-63>
- Zhou H. (2012). Measurement and theoretical perspectives of immigrant's assimilation in China. *Population Research* 36(3), 27-37