In their own words: A synthesis of the qualitative research on the experiences of adults seeking asylum. A systematic review of qualitative findings in forced migration

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ABSTRACT

Quantitative research indicates that some forced migrants have mental health needs. Asylum seekers are a subgroup of forced migrants applying for asylum status in a host country, and are often subject to rights restrictions and threat of deportation, though little is known about subjective experiences of the asylum journey and process of claiming asylum. The current paper therefore describes a systematic review of the qualitative literature, examining asylum seekers experiences of asylum journey, from country of origin, to arrival and adaptation to host countries. A search of four databases yielded 122 studies. Inclusion / exclusion criteria were applied and 15 studies were retained and critically appraised. The country where research was conducted, study aims, sample characteristics and methodological approaches were all critically reviewed for included studies. Study aims fell into four themes; ‘an aspect of the asylum seeker journey’; ‘psychological distress and wellbeing’; ‘cultural identity and adaptation to new environment’ and ‘social welfare, employment and housing’.

Studies were generally high quality and indicate issues around choice of asylum destination, distress created by uncertainty around asylum decision and hostile reactions of host-communities. However, few studies have examined the experiences of asylum seekers specifically, which is important given the unique circumstances of this population.

**Key words:** Asylum seeker, qualitative, systematic review
INTRODUCTION
The Office of the United Nations High Commissioner for Refugees (UNHCR) estimated that in 2013, approximately 51.2 million people were forcibly displaced worldwide. Around 16.7 million of these people were refugees, 33.3 million were people forcibly uprooted and displaced within their own country, and over a million people submitted applications for asylum worldwide (UNHCR, 2013).

The 1951 Convention Relating to the Status of Refugees, defines a refugee as:

‘A person who has a well-founded fear of persecution for reasons of race, religion, nationality, membership of a particular social group or political opinion. Someone who is outside the country of his/her nationality and is unable or, owing to such fear, is unwilling to avail himself/herself of the protection of that country; or who, not having a nationality and being outside the country of his/her former habitual residence is unable, or owing to such fear, is unwilling to return to it’ (Convention Relating to the Status of Refugees, 1951)

An ‘asylum seeker’ is someone who has made a claim under the 1951 Convention and is awaiting a decision on their case. That person remains an asylum seeker for so long as their application is pending (Migration Watch UK, 2006). A minority of applicants gain permission to stay in the UK (‘leave to remain’) and may stay long enough to settle in the UK; this may mean official recognition as a refugee, permission to stay for ‘humanitarian protection’ (HP), or through ‘discretionary leave to remain’ (DLR), though in these cases, the individual can stay in the UK for five years and can then apply for indefinite leave to remain. However, if an asylum seeker is unsuccessful in their application, whilst they can go through an appeals process, they are technically a ‘failed’ asylum seeker and are at risk of being deported back to their country of origin.

The asylum-status of individuals seeking asylum is in a continuous state of flux; as noted by Stewart (2005), ‘asylum status is an extremely dynamic concept’ (p.504). Consequently, some research studies have labelled their population ‘forced migrants’ (e.g. Palmer & Ward, 2006) to indicate that they may be asylum seekers or refugees. This paper utilises this terminology, unless ‘asylum seeker’ or ‘refugee’ is specifically stated.

Migration Watch UK (2004) estimate that between 1997 and 2004, 499,000 persons applied for asylum in the UK. Of these, 185,000 either were granted asylum at the initial hearing or on appeal, or granted exceptional leave, discretionary leave or humanitarian protection (‘refugee’ status); 314,000 had their asylum claim rejected. Seventy-five thousand of these persons were
removed or deported, leaving 239,000 asylum seekers in the UK whose application failed, with a proportion of these progressing through an appeals process.

The process of waiting for the outcome of an asylum application can take up to 6 months (UK Government, 2014). In terms of rights for asylum seekers, the UNHCR (2013) highlights that the majority of asylum seekers do not have the right to work in the UK, and therefore rely on state support. Housing is provided, though asylum seekers cannot choose location, so can be placed anywhere in the country. Financial support is either through cash, or often through the use of vouchers (limited to certain goods and outlets). Asylum seekers who have had their claim for asylum refused, are temporarily entitled to similar rights whilst they appeal, though as mentioned, are at increased risk of being detained and / or deported at any time. People who have been granted ‘refugee’ status have a different set of rights to those seeking asylum, including a choice about where to live and rights to work.

Van der Veer (1998) notes that each stage of the forced migration process is a potential risk factor for mental health problems; experiences in country of origin, in the process of displacement, in travelling to, and then adapting to life in a new country. By definition of being a forced migrant, in their country of origin people may have been subject to conflict, human rights violations, physical and psychological violence / torture and poverty (e.g. Neuner et al., 2004). On arrival in a host-country, forced migrants then face the challenge of coping with stressors in their new environments such as lack of provision, or understanding, of services, cultural disconnection, racism, isolation and low income (Palmer & Ward, 2006). Asylum seekers are a sub-group of forced migrants who are likely to have had these experiences, but additionally have restrictions in host-countries as described previously to contend with, as well as uncertainty about their asylum status and threat of deportation; indeed Gerritsen et al. (2006) contend that higher prevalence rates of physical and mental health problems in asylum seeking populations may be a result of these additional stressors.

A significant body of research has used quantitative methodologies to examine the psychopathological reactions of asylum seekers to this set of stressors. It has been estimated that between a third and a half of all asylum seekers experience some form of mental distress, with common diagnoses including post-traumatic stress disorder (PTSD), depression and anxiety (e.g. Carey-Wood et al., 1995). PTSD is currently perhaps the most popular descriptor of asylum seeker mental health (Afuape, 2011).
Despite this body of research exploring the experiences of asylum seekers using quantitative methodologies, there seems to be a lack of research exploring experiences of this population using qualitative approaches. Unlike quantitative approaches, which examine causal relationships and attempt to verify earlier theories (Elliot et al., 1999), qualitative approaches focus on gathering data and information about meaning; how people experience phenomena and make sense of the world (Willig, 2008). Qualitative methodologies encompass a diverse array of approaches (Parahoo, 2006), though share a central purpose of an enrichment of understanding and meaning. Thomas and Harden (2008) propose that qualitative studies provide important perspectives, and would benefit from being examined with the same rigour as quantitative studies to examine a specific research area.

Ahearn (2000) advocates for qualitative research with asylum seekers, noting that such methods allow the voices of this population to define and clarify emotional struggles and psychological reality. This notion is supported by O’Neill and Harindranath (2006), who suggest that “Research methodologies that create spaces for the voices ... of asylum seekers through narrative methods can...raise awareness, challenge stereotypes and ... produce critical texts that may mobilize and create “real” change.” (p.45). Additionally, concepts such as ‘PTSD’, ‘stress’ and ‘depression’ (often measured by quantitative studies when considering the psychological status of asylum seekers), are Western constructs that potentially tell us relatively little about what it is like to be an asylum seeker, which qualitative research could elicit. Further, the focus on trauma-reactions means that limited attention has been directed to positive adaptation and resilience (Ahern, 2000).

**Aims of the Systematic Review**

Thus, it appears that there is an evidence base around the psychological status of asylum seekers from a quantitative perspective, and these findings can be examined elsewhere (e.g. Onyut et al., 2009). However, there is an apparent paucity of research using qualitative methodologies with this population. A systematic review of the available literature was therefore conducted to identify and synthesise available research on the subjective experiences of asylum seekers in relation to their asylum journey - in the words of asylum seekers themselves. Therefore, the authors aimed to critically appraise the existing literature, including a review of the quality of included studies.
METHOD

Search Strategy
Authors searched the OVID databases ‘Ovid Medline’, ‘PsycINFO’ and ‘PsycARTICLES Full Text’, and ProQuest ‘Sociological Abstracts’. The searches in these databases were used to specifically identify articles that yielded research on the experiences of asylum seekers using qualitative methodologies. The following search terms and combinations of Boolean operators were applied: “Qualitative” OR “Grounded Theory” OR “Interpretative Phenomenological Analysis” OR “IPA” OR “Thematic Analysis” AND “Asylum Seeker*”. These terms were searched as keywords and applied to the full texts of generated articles. The search was originally conducted on the 28th November 2012, and a total of 117 papers were identified, as well as a further 8 articles via conference presentations and dissertations. All remaining articles were reviewed manually and screened by the first author, using inclusion and exclusion criteria. The search was repeated on 27th May 2013; five more articles were identified and these were all excluded via the exclusion criteria.

Inclusion & exclusion criteria
Studies were included in the review if they were qualitative research studies; if they included primary data (i.e. direct quotations from people seeking asylum); if they utilised mixed methodologies (quantitative and qualitative components), though only the qualitative aspect of the study was critically reviewed; if studies included participants who were asylum seekers at the time of study commencement; if participants were adult asylum seekers over 17 years old; and if the papers were published in the English language.

Studies were excluded from the review if they utilised a purely quantitative methodology; if they did not include any primary data; if the focus of the study was on other populations (i.e. not asylum-seekers); if the papers were not in the English language; if they were not published in peer-reviewed journals (for quality purposes); and if the focus of the study was related to other aspects of the asylum seeker experience, outside of their experiences with the asylum journey and process (e.g. around diet, or physical health problems for example).

By applying these inclusion criteria, a total of 15 articles were identified and retained for review (see Figure 1). Following identification and access of these articles, the subsequent stage of the systematic review process involved critiquing these studies in order to ascertain what can
be confidently concluded based on the quality of these studies, and their main findings in relation to the systematic review question.

*Figure 1 – Systematic Review Process*

**Quality**

Mays and Pope (1995) have argued for the importance of developing quality frameworks in order to judge the findings of qualitative research. In this context, the concept of ‘quality’ refers to the importance of trustworthiness and credibility in qualitative research (Law *et al.*, 1998), to the extent that one would feel satisfied with the qualitative research in order for social policy to be based on the findings (Guba & Lincoln, 2005). The authors of this study therefore felt it important to develop a framework to be able to assess the quality of each of the articles included in this review. Three articles were accessed and utilised to develop such a framework (Tracy, 2010; Spencer *et al.*, 2003 and Law *et al.*, 1998). Authors identified ten quality criteria: purpose and aims, literature review, study design, methods, sample, research governance and ethics, data collection, data analysis, credibility and reflexivity, and discussion and conclusions. A copy of the critical appraisal framework, with explanations of these criteria and the system for scoring is included in *Table 1*. Scores for each of the ten domains were judged on a 3-point scale and then summed to give an overall ‘Quality’ score out of twenty. Scores are summarised in *Table 2*. The authors considered that papers scoring 16-20 were ‘good’ quality, papers scoring 11-15 were of a ‘medium’ quality, and papers scoring 10 and below were considered as poor quality.

*Table 1 – Critical Appraisal Framework*

*Table 2 – Summary of Studies*

**RESULTS**

Table 1 provides a summary of the 13 articles retained for review. The studies were appraised with reference to the overall quality and relevant characteristics reviewed, e.g., sampling etc. Study numbers provided correlate to their position within Table 1.

*Country where research was conducted*
Seven studies were conducted in the UK (Studies 1, 2, 4, 7, 8, 9 & 11), two in Australia (3 & 6), two in Ireland (5 & 10), one in South Africa (12), and one in Austria (13). Most studies were therefore conducted in Western countries.

**Study aims & purposes**

Given that the systematic review aimed to develop a sense of subjective asylum seeker experiences as investigated by qualitative methodologies, it was perhaps unsurprising that aims of studies varied with regard to focus on a specific aspect of the asylum seeker experience. On examination, the aims of the studies could be clustered broadly under four themes; *a particular aspect of the asylum seeker journey, psychological distress or wellbeing, cultural identity and adaptation to new environments, and social welfare, housing and employment*. The extent to which studies managed to achieve these aims is described in the discussion in relation to the quality review.

Four studies (2, 3, 6 & 9) explored an *aspect of the asylum seeker journey*. Zimmerman (2010) explored the *destination choices* of Somali asylum seekers, and the role of financial support, shown to be connected with how effectively people adjust in new environments (e.g. Thielemann, 2003). Coffey *et al.*, (2010) examined the *experience of immigration detention* from the asylum seeker perspective and aimed to identify possible psychological and interpersonal consequences for life post-release. Bogner *et al.*, (2010) explored factors involved in forced migrant disclosure of sensitive personal information in *Home Office interviews*. Finally, Rees (2003) examined the experiences of asylum-seeking women around the *impact of uncertainty of status* on psychological, physical, spiritual, social and cultural wellbeing.


Four studies (5, 8, 10 & 12) explored forced *migrant’s cultural identity and adaptation to new environments*. O’Sullivan-Lago *et al.*, (2008; 2010) in their studies (reviewed together due to
same data sets being used) investigated whether in emerging ‘cultural contact zones’ (areas where there is diversity of nationals, immigrants and asylum seekers) there is an impact on the cultural identity of the individual, and further investigated schooling as a continuity strategy. Pearce & Charman (2011) explored the concept of moral panic from Social Identity Theory (SIT) and Social Representations Theory (SRT) perspectives aiming to understand the process of moral panic in an area in the UK with high numbers of asylum seekers. Conlon (2011) used a framework developed by Lefebvre & Levich (1987) to understand the ‘everyday’ amongst asylum seeking women, aiming to illustrate the importance of this framework in being able to understand the ‘fractured mosaic’; dynamic elements that mark asylum seekers social, material and cultural everyday lives. Finally, Rugunanan & Smit (2011) explored forced migrant experiences of struggles in daily life, as well as survival strategies.

Finally, two studies (4 & 11) focused on social welfare, housing and employment. Hussein et al., (2011) examined the potential of forced migrants for employment in the social care sector in the UK, presenting a sub-study of a large, Home Office funded multi-site project. Dwyer (2005) and Dwyer & Brown (2005), two studies which were analysed in a combined way, drew upon data from one study (the ‘Leeds Study’) and aimed to explore welfare of migrants at an EU (European Union) level, a UK level and using qualitative data from the Leeds study to explore housing, social security rights and adequacy of welfare provision around housing and financial needs.

Sample Characteristics

i) Sampling and Sizes
The vast majority of studies interviewed over 10 forced migrants in their studies, and eight studies interviewed over 20 participants (2, 4, 6, 7, 8, 10 11 & 13). The one exception to this is Whittaker et al., (2005), who interviewed a smaller sample of 5 female participants.

ii) Gender of Participants
Nine studies had mixed-gender samples. Of the mixed-gender studies, five had more of an even gender-balance. Four studies had female-only samples. Of note Zimmerman (2010) interviewed 4 females and 9 males around destination choices for asylum, noting that only one of the female participants was an active decision maker and suggesting that female forced migrants are more likely to have decisions taken for them. Rees (2003) interviewed female asylum seekers (n=23) from East Timor, noting that many women had experienced sexual
assaults and other human rights violations, and questioned whether living with prolonged asylum seeker status would compound problems relating to these prior abuses. Conlon’s (2011) study focussed on a female-only sample (n=25), suggesting evidence of times of greater female immigration (Walter, 2001) and greater scrutiny on forced migrant females in the media (White, 2002). Rugunanan & Smit (2011) conducted mixed-gender focus groups around experiences of asylum seeker daily struggle and survival strategies but conducted 10 interviews with females from the focus group, suggesting a focus on family and noting that many male focus-group attendees did not have families with them.

iii) Asylum status
Many of the studies contained a mixed sample of forced migrants, so were not necessarily focussed specifically on asylum seeker experiences. The majority (n=10) of studies (1, 2, 3, 4, 5, 7, 10, 11, 12 & 13) had samples that contained asylum seekers, refugees, immigrants and other populations (e.g. ‘Home’ citizens). Of the studies reviewed, only two studies (6 & 9) considered asylum seekers specifically. One further study (8) considered groups of asylum seekers only, though also used data from a focus group of British nationals.

iv) Country of origin
The reviewed studies focussed on forced migrants from a range of countries (2, 4, 5, 7, 8 10, 11, 12 & 13) predominantly countries in the Middle East, Africa and Europe. One study (6) focussed solely on forced migrants from East Timor, two studies (1 & 9) on forced migrants from Somalia and one study on forced migrants from the Middle East only (3). The majority of studies (n=9) contained mixed-samples in relation to country of origin.

Methodological Approaches
i) Design
All studies reviewed employed cross-sectional designs and used qualitative methodologies. Two of the studies utilised mixed methodologies; Coffey et al., (2010) and Renner & Salem (2009) used both qualitative interview data and quantitative methods (checklists and questionnaires) to measure symptomatology in their samples.

ii) Data Collection
All studies used semi-structured interviews. In the majority of cases interviews were audio-recorded and transcribed verbatim, but a number of studies (2, 3 & 4) noted that a minority of
participants requested that notes be made at interview rather than use of audio-recording, primarily due to association with previous interrogations. This is likely to have impacted on the quality of the data obtained.

A number of studies utilised focus group data (e.g. Whittaker et al, 2005) or interviews with other individuals, such as employment staff (4) or groups of UK nationals (e.g. 7). However, a commonality amongst all of the studies was that they all utilised data from individual interviews. For all studies, this data would have formed a significant part of the data collection & thus analysis.

Nine studies reported the used of interpreters for at least some of the interview participants (2, 3, 4, 6, 7, 9, 11, 12, 13), though use of interpreters were described by varying degrees of detail across the studies. In four studies (1, 5, 8 & 10) it was unclear as to whether interpreters were required.

### iii) Data Analysis
All studies reviewed described, to varying extents, a process of coding the data and developing themes. Eight studies used thematic analysis approaches (2, 3, 5, 6, 8, 9, 10 & 11) and two studies reported using thematic and framework analytic approaches (4 & 7). One study utilised IPA (1), one study (12) used axial coding and memo-writing consistent with a grounded-theory approach (although not presented as a grounded theory), and one study (13), analysed qualitative data by coding and dichotomously analysing data quantitatively. Four studies used computer software packages such as NVivo (3, 4 & 5) or Nudist 6 (11) to support the data analysis process.

**Themes & Conclusions**
The key findings, in relation to the four broad areas of investigation we identified can be summarised by the following:

### i) The journey of forced migrants
Asylum seekers do not move to places where they can get the best conditions (an idea often propagated in host-countries to stigmatise new arrivals), rather there are multiple reasons for asylum movement (Zimmerman, 2010). Detention in the UK for forced migrants creates long-term psychological & interpersonal difficulties (Coffey et al., 2010). Home Office interviews
are difficult for forced migrants to negotiate, and often they do not feel safe to disclose issues (Bogner et al., 2010). Finally, the impact of uncertainty around asylum decisions creates distress for asylum seekers (Rees, 2003).

ii) Exploring psychological distress or wellbeing
Reviewed studies highlight that males and females are likely to have different profiles in relation to symptomatology (with females reporting increased depression, shame and somatisation – see Renner & Salem, 2009) and coping (with females focusing on the importance of contact with family and talking with others – see Whittaker et al., 2005). For example, female Somali forced migrants in the UK were considered to utilise a ‘get on with it’ approach to coping and utilise support from family, religion and services, though experience religious and cultural pressures and paradoxically value both support and concealment of distress (Whittaker et al., 2005).

iii) Forced migrant cultural identity & adaptation
As well as potential stigmatisation (Pearce & Charman, 2011) forced migrants are regularly concerned about daily survival and issues of housing, xenophobia, protection against crime and deportation (Rugunanan & Smit, 2011). Additionally, forced migrants attempt to use cultural identity strategies to integrate into host communities, such as the ‘I as a human being like you’ strategy (O’Sullivan-Lago et al., 2008 & O’Sullivan-Lago & de Abreu, 2010). Everyday social and material lives of forced migrants can be considered to be a ‘fractured mosaic’ and a Lefebvrian framework can help understand the everyday for this population (Conlon, 2011).

iv) Social welfare, housing & employment for forced migrants
Forced migrants are willing to work in the UK but there are barriers to this (e.g. asylum seekers not having the right to work), (Hussein et al., 2011). There are multiple welfare and accommodation difficulties for asylum seekers in the UK (Dwyer, 2005 & Dwyer & Brown, 2005).

Thus, from these findings a number of issues can be concluded. There are only a handful of studies pertaining to asylum seekers specifically, which generally seem to indicate issues around choices about asylum destination (a choice which is borne out of necessity of safety rather than a choice about best possible conditions), the distress that is created as a consequence of living with uncertainty about an asylum decision, and the sense that asylum seekers are met
with hostility by some of the UK public (consistent with the public, media and political rhetoric outlined earlier in the introduction). The remainder of the studies used mixed populations of forced migrants and thus it is difficult to ascertain how the sense of uncertainty that is created by waiting for an asylum decision impacts on the samples of studies reviewed. However, these studies may give us some clues about the pressures and stressors that asylum seekers may be facing (e.g. around detention, Home Office interviews, the mental health system, everyday struggles, integration with host communities and negotiating the welfare system, being prevented from being allowed to work). They also give clues to the psychological impact of these pressures, as well as some of the ways in which forced migrants cope with their experiences (e.g. around use of religion and family support) and demonstrate resilience.

**DISCUSSION**

The authors found the majority of the studies reviewed to be of medium to high quality. Most studies employed a high level of rigour in their literature review, aims, and methodologies. However, a relative weakness across all of the studies was around credibility and reflexivity, as well as providing a researcher position and worldview. Further, studies generally lost quality ratings due to a lack of description of ethical procedures and considerations.

It is reasonable to assume that the findings of the five ‘high’ quality studies are relatively robust. These studies suggest that forced migrants are likely to experience psychological and interpersonal difficulties if detained (Coffey et al., 2010), are willing to join a workforce despite barriers to this (Hussein et al., 2011), are likely to utilise certain cultural identification strategies to maintain a sense of cultural identity in new environments (O’Sullivan-Lago et al., 2008; O’Sullivan-Lago & de Abreu, 2010), draw upon certain coping strategies such as family, religion and support services (Whittaker et al., 2005), and are likely to experience difficulties with disclosure in Home Office interviews (Bogner et al., 2010). Interestingly, none of these studies exclusively utilised samples of asylum seekers; all had mixed samples of forced migrants.

It is less certain how much can be derived from studies of ‘medium’ quality. These studies explored a range of different experiences of forced migrants, and all three of the studies that interviewed asylum seekers specifically are of ‘medium’ quality, including a study on the effects of uncertainty of asylum status (Rees, 2003), choice of destination for asylum seekers (Zimmerman, 2010) and hostility towards asylum seekers from host communities (Pearce &
Charman, 2011). In relation to mixed samples of forced migrants, four other studies (Palmer & Ward, 2007; Conlon, 2011; Dwyer, 2005 & Dwyer Brown 2005; Rugunanan & Smit, 2011) were also rated as of a ‘medium’ quality. Therefore, whilst issues around mental health service provision for asylum seekers, experiences of cultural everyday lives, welfare issues and daily survival are usefully highlighted from these studies, more robust research is needed to support these findings.

Only one study was rated as being ‘low’ quality (Renner & Salem, 2009), primarily due to a lack of ethical, data collection and reflexivity issues described in the study. Whilst this study on gender differences in symptomatology and coping in forced migrants is an area of interest, more research is needed on this in this area.

The included studies were largely drawn from samples in a number of Western countries, and particularly from the asylum seeker process in the UK. It is therefore possible that the studies reviewed illustrate a ‘Westernised’ perspective and it is unclear whether the findings can be generalised to other contexts, though they may provide some understanding of the experiences of forced migrants moving to Western countries. At the same, forced migrants may face common assimilation and integration challenges given the requirement in adjusting to leaving their home country and arriving in and settling in the host country as well as their onward ‘journey’ (see Berry, 1980 and Douglas 2010).

Also, given the overall quality of the studies, it was possible to highlight four key themes from the findings; the journey of forced migrants, exploring psychological distress or wellbeing, forced migrant cultural identity and adaptation, and social welfare, housing and employment. However, whilst the studies have been relatively comprehensive at detailing isolated aspects of the asylum seeker journey, no studies seemed to consider the process and journey as a whole.

There were a number of issues necessary to highlight in relation to the sample of studies, including around overall sample characteristics, asylum status, gender, age and country of origin.

The majority of reviewed studies focussed solely on the perspective of the forced migrant, though studies focussing on integration in communities and in relation to welfare and housing, tended to focus on a mixed sample of forced migrants (including refugees, asylum seekers and
other immigrant populations), people in host communities, and service providers / professionals. These studies may be useful for understanding the forced migrant experience, as they consider host-community perspectives (e.g. around asylum seekers being a perceived threat), though one has to be cautious in interpreting this data in relation to a ‘lived experience’ of asylum seekers given the mixed nature of the samples. Despite this, studies with mixed samples did ensure that data was attributed to either forced migrants or other sources, and consequently allows for an understanding about where the data arose from. By doing this, studies still remain of high importance in considering forced migrant experiences.

As most studies included both asylum seekers and refugees, it is difficult to ascertain the specific experiences of asylum seekers only. Only three studies (6, 8 & 9) can be reliably examined in relation to the ‘asylum seeker’ experience, and whilst other studies can provide an understanding of the experiences of forced migrants as a broader group, the extent to which they are able to describe the asylum seeker experience is less clear. As noted by Conlon (2011), asylum status is extremely dynamic, and can change regularly and rapidly; consequently, it may be challenging to recruit groups of asylum seekers only.

Given the gender mix of studies, one has to be cautious in generalising as to whether the effects of the phenomena explored are experienced in similar ways by both genders, though the female-only samples may provide specific understanding of the ways in which females experience aspects of the asylum process. However, findings from female-only studies may not necessarily generalise to male experiences, and as noted by Renner & Salem (2009), there do appear to be gender differences in mental health presentations and coping responses. Additionally, the review highlights that the specific needs and experiences of women are neglected. Indeed, apparent sampling strategies have focused on the generating of understanding based on migration status and as such the current literature is gender-blind.

Additionally, the vast majority of samples contained a mix of forced migrant participants from a range of European, Middle-Eastern and African countries, and consequently it may be difficult to identify issues pertinent to specific cultural populations. Despite this, some studies did focus on participants from specific countries and regions (e.g. East Timor and Somalia). These studies may provide more insight into the lived experiences of forced migrants from these cultural backgrounds.
All of the studies utilised cross-sectional designs, employing qualitative methodologies using semi-structured interviews. In relation to the data analysis, the majority of studies used thematic analysis. Only one study used IPA, and no studies used a grounded theory methodology, and is a potential methodological gap in this area (though Rugunanan & Smit, 2011, used analytic methods consistent with a grounded theory methodology). Some studies used computer software packages. The use of such packages in qualitative research has been criticised by some qualitative researchers, who suggest that their use removes the researcher from being close to the data, thus constraining the analytic process (Lee & Esterhuizen, 2000).

**Implications for Research**

This review has highlighted that there are limitations in the research base of qualitative studies focussing on the experiences of asylum seekers (as opposed to mixed samples of forced migrants). More qualitative research is needed on the ways in which asylum seekers make sense of their circumstances (e.g. around uncertainty regarding their asylum position), be gender sensitive as well as need to develop further understanding on specific populations, e.g., those with experiences of mental health. It would be beneficial to seek to replicate findings described in this review with this population specifically.

The majority of studies have utilised thematic analysis approaches with their populations. Alternative qualitative approaches, such as Grounded Theory may yield new and novel findings with this population and may provide a sense of how various processes the asylum seekers are involved with interact, and the meanings that asylum seekers make of these processes.

Future studies need to be reflexive and credible using robust quality control methods in order to ensure that quality remains high. Many reviewed studies suggested a lack of reflexivity and did not describe the position of the researcher. This needs to be addressed in future studies in order that the quality of qualitative research remains of a high standard. Ethical procedures and considerations were another weakness across the studies. Indeed, this is a major issue with many of the studies reviewed and our recommendation would be that studies in this area clearly outline and justify their consideration of research governance and safeguarding issues.

**Conclusions**
This paper has presented a systematic review of the literature relating to the subjective experiences of asylum seekers using qualitative methodologies, and has detailed the rational, methods and a quality framework relevant to the review. Findings of the review have been presented in a table and in a narrative review, and the discussion has explored these findings and ascertained directions for future research. Overall, it seems that whilst there is a body of qualitative literature relevant to forced migrant populations that may be helpful in understanding asylum seeker experiences, very few studies have examined the experiences of asylum seekers specifically; this is a gap in the research, especially given the unique circumstances of asylum seekers as opposed to other forced migrants. Despite this, the review has given some important direction to researchers who are interested in the subjective experiences of asylum seekers; choice about asylum destination, distress around the uncertainty of asylum applications and hostility towards this population from sections of the public all seem to be key issues for this group and warrant further investigation. The current review provides evidence for the need for more mental health services targeted for asylum seekers, at it highlights areas of service provision that are lacking; further analysis of subject asylum seeker experiences and mental health would be beneficial for this. Studies provide pointers to a variety of stressors faced by asylum seekers, as well as the impact of these stressors, and how this population copes with these experiences.

Whilst the literature reviewed has been of a high standard, future qualitative research needs to be robust in terms of reflexivity, stating positions of researchers and outlining ethical considerations in order to provide credible findings in relation to this population.

A strength of the current review is that it has reviewed a good-sized sample of papers (n=15) in a robust and transparent way. A limitation of the study is that the authors designed their own quality framework to critically appraise papers, which, although informed by the literature, is not necessarily a widely accepted framework. Further, only one author reviewed the studies for inclusion / exclusion criteria and to draw out themes around the findings of reviewed studies. Employing a more robust triangulation method, using multiple reviewers, would enhance the reliability of deriving studies to be reviewed. Future studies would benefit from these considerations.
REFERENCES


Figure 1: Summary of Systematic Review Process

Databases searched:  PsycArticles (OVID)  
PsycINFO (OVID)  
Medline (OVID)  
Proquest Sociological Abstracts

Search terms used:
“Asylum Seeker*”
AND
Qualitative OR “Grounded Theory” OR “Interpretative Phenomenological Analysis” OR “IPA” OR “Thematic Analysis”

Number of articles identified: 117  
Search conducted on 28/11/2012


Studies with no primary data = 22  
Duplicate papers = 18  
Papers not in English language = 6  
Interviews with other populations (i.e not asylum seekers) = 21  
Articles relating to other aspects of asylum seeker experience = 14  
Articles related to children under 17 years old = 9

Papers using purely quantitative methodologies = 2  
Papers not in peer-reviewed publications = 2

Articles retained = 14  
Conference presentations = 4  
Dissertations = 5

8 Authors contacted regarding conference presentations & dissertations.  
5 responses, 8 further articles identified.  
Manual review of titles, abstracts and articles. Studies not relevant to the systematic review research question excluded. Inclusion and Exclusion criteria applied.  
1 additional article identified from conference presentations & dissertations

Electronic search of “grey literature” using search terms: Google, Google Scholar.  
Repeats excluded, Inclusion and Exclusion criteria applied.  
0 additional articles identified from Grey Literature

Number of articles remaining = 15 (4 of these articles based on 2 studies; therefore 13 studies retained)  
13 studies Retained for systematic review  
Search repeated on 27/5/2013 – 5 new articles identified – all excluded via exclusion criteria
TABLE 1 – CRITICAL REVIEW FRAMEWORK

A. Purpose and Aims – have authors clearly stated the purpose and aims of the research? Is a qualitative methodology appropriate? Is the topic of the research relevant, timely, significant and interesting?

B. Literature review – has article completed a relevant literature review detailing study background, clinical relevance, gaps in the current research and resulting justification?

C. Design – Is study design appropriate for the research question and objectives? Is design defensible and has this been discussed? Have limitations of the research been reflected upon? Have the nature of the results been described? Have the beliefs, worldview, values and biases of the researcher been made explicit? Is the process auditable (i.e. in order for the possible replication of the study)?

D. Methods – Does article describe methods that have been used to generate data? Was this method appropriate for the design?

E. Sample – have the sample design and selection, and study locations been justified plus a rationale provided? Are participants relevant to the research question? Was their selection well-reasoned and described? If there were participants who did not participate, were reasons for this considered and described?

F. Research Governance & Ethics – Have ethical issues been considered? Were researchers thoughtful about research contexts and participants, and is there discussion about avoiding potential harm to participants? Have consent, confidentiality and anonymity processes been described? Has the study sought and obtained ethical approval for the study? What description is available regarding research governance? Were participants offered further information about sources of support?

G. Data collection – have researchers given a clear description of the process of data collection (including description of site, who is the person collecting the data, methods of data collection, procedures etc.)? Were data collection methods appropriate for research objectives and settings? Were data collection strategies comprehensive enough to support rich and robust descriptions of observed events? Have researchers considered the ways in which data collection methods may have influenced the data? Has it been shown that depth, detail and richness were achieved in data collection? Was data collected until saturation or redundancy in data was reached?

H. Data Analysis – Was data analysis inductive and findings adequately corroborated? Was the process of transforming data into themes and codes described adequately? Were the rules of analysis reported? Has the diversity of the perspective and content been explored? How well has detail, depth and complexity of the data been conveyed?

I. Credibility (trustworthiness) & Reflexivity – Was the process of triangulation reported (by source, methods, researcher and theories)? Has the researcher taken into account his/her biases in the research process? Are other ways of viewing the data reported? Is there evidence of the impact on the researcher?

J. Discussions and Conclusions – Does the study achieve what it purports to be about (i.e. in terms of its original aims and purposes)? Does it meaningfully interconnect the literature? Are the findings clearly supported by the evidence? Has the knowledge base been extended by the research? Are the limitations of the research clearly considered? What is generalisable and has this been considered via a critical lens? Do the authors provide an evaluation and how is this described?

Using this framework, each study was reviewed with each domain being rating on a 3 point scale (0, 1 or 2; see Chenail, 2011):

0 Reviewer determined that the study in question gave little or no consideration to the questions posed in the quality framework for that domain, or that there were significant limitations. In practice, this meant on asking the questions noted above for a particular domain, the reviewer suggested that none of the questions were answered sufficiently.

1 Reviewer considered that the study had addressed key issues but there were some limitations or uncertainties. Considering the questions asked of that particular domain, a score of one indicated that some of the questions had been answered sufficiently, but others not so.

2 The paper was clear and robust in answering all of the questions posed by that domain in the framework.
Table 2 Summary of Studies in Systematic Review
## HIGH QUALITY STUDIES

<table>
<thead>
<tr>
<th>No</th>
<th>Authors</th>
<th>Country</th>
<th>Aim</th>
<th>Sample</th>
<th>Method (design, data collection, data analysis)</th>
<th>Results / main themes</th>
<th>Conclusion</th>
<th>Quality Rating framework</th>
<th>Overall Quality Rating</th>
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<tbody>
<tr>
<td>1</td>
<td>Whitaker, Hardy, Lewis &amp; Buchan (2005)</td>
<td>UK</td>
<td>To explore individual &amp; collective understandings of psychological well-being in young Somali asylum seeker or refugee women.</td>
<td>5 females 17-28 Age: asylum seekers=2 Refugees=3</td>
<td>Recruitment: voluntary Somali organisation. Data collection: focus group &amp; individual semi-structured interviews. 40-90 minutes long. Interview schedule - adapted to acknowledge emerging themes. Data analysis: IPA used. Triangulation reported. Checked emerging themes with participants. Other: Quality framework used to ensure robust process.</td>
<td>1. Resilience &amp; protection a) ‘Get on with it’ approach, b) support from family, c) religion and services 2. Identity &amp; beliefs a) Conflict &amp; convergence, b) Navigation &amp; acculturation 3. Concealment, distancing &amp; secrets a) Concealing concepts &amp; emotions b) Secrets, Spirituality considered across themes</td>
<td>Young Somali women ‘get on’, cope &amp; value support from family, services &amp; religion. There are changing cultural &amp; religious pressures around concealing distress - participants valued support as well as concealment and fearing disclosures</td>
<td>A=2 B=2 C=2 D=2 E=1 F=2 G=2 H=2 I=2 J=2</td>
<td>20/20</td>
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<td>3</td>
<td>Coffey, Kaplan, Sampson, Tucci (2010)</td>
<td>Australia &amp; England</td>
<td>To examine experience of immigration detention from perspective of previously detained asylum seekers, &amp; identify consequences of experiences for life after release.</td>
<td>1 female 16 male Mean: 42 Age: Asylum seekers=4 permanent residency=11 naturalised citizens=2</td>
<td>Recruitment: via NGO Data Collection: audio-recorded, transcribed. Interview in English (n=10) or with interpreter (n=7) Interview schedule: mental &amp; physical health, daily life, coping significant events, relationships. Data Analysis: Coding &amp; themes developed. Triangulation reported. NVivo used.</td>
<td>1. Detention themes e.g. confinement, deprivation, injustice, isolation, hopelessness 2. Post-detention themes E.g. view of self, relationship difficulties, insecurity 3. Current mental health E.g. depression, anxiety cognitive difficulties.</td>
<td>Detention has long-term pervasive effects on psychological &amp; interpersonal difficulties.</td>
<td>A=2 B=2 C=1 D=2 E=1 F=2 G=2 H=2 I=2 J=2</td>
<td>18/20</td>
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<td>4</td>
<td>Husemen, Menthorpe &amp; Stevens (2011)</td>
<td>UK</td>
<td>To examine potential of refugees &amp; asylum seekers to work in social care in England (sub-study of a government funded, 6-site project)</td>
<td>13 female 25-46 Age: Asylum seekers=9 refugee=11</td>
<td>Study site: Mix of high &amp; low immigration areas Data collection: 1-hour semi-structured interviews, audio-recorded &amp; transcribed. In English or with interpreter (French / Arabic) Interview schedule: Previous work &amp; qualifications, job seeking in UK, volunteering, language acquisition, aspiration and ideas about social care. Data Analysis: Coding, themes, triangulation &amp; framework analysis used. NVivo used.</td>
<td>1. The attraction of care work 2. Barriers &amp; Challenges in gaining employment - e.g. lack of UK experience, language skills, qualification recognition, prejudice &amp; racism 3. Possible strategies to utilise refugees &amp; asylum seekers in social care</td>
<td>- Willingness of refugee &amp; asylum population to join workforce - Barriers &amp; strategies identified - Despite being a small study, authors feel findings are generalisable.</td>
<td>A=2 B=2 C=1 D=2 E=1 F=2 G=2 H=2 I=2 J=2</td>
<td>18/20</td>
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<tr>
<td>Study</td>
<td>Country</td>
<td>Purpose</td>
<td>Sample Details</td>
<td>Methodology</td>
<td>Findings</td>
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<td>7</td>
<td>Palmer &amp; Ward (2007)</td>
<td>UK</td>
<td>Explore asylum seeker perspectives on health issues &amp; services.</td>
<td>Asylum seekers=6, British citizens=1, Refugees=13</td>
<td>An integrated approach, involving service users in planning services is needed for better awareness of issues that affect mental health in this population.</td>
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<td>8</td>
<td>Pearce &amp; Charman (2011)</td>
<td>UK</td>
<td>Psychological study of mental panic, exploring Social Identity Theory (SIT) &amp; Social Representations Theory (SRT). Aims: (a) theorise content &amp; process of moral panic &amp; (b) understand cause &amp; impact/response to topic of asylum seekers.</td>
<td>Focus groups of asylum seekers &amp; British citizens</td>
<td>Social psychological processes are one contributory factor to host receptivity to moral panic, &amp; strategies adopted by ‘folk devils’ to cope with stigmatised group membership were identified.</td>
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<td>9</td>
<td>Zimmerman (2010)</td>
<td>UK</td>
<td>Explore destination choices of Somali asylum seekers (usually an excluded voice), &amp; the role of financial support (connected to how people adjust to new environments)</td>
<td>All left Somalia Aged between 18 &amp; 56</td>
<td>1. Why participants sought asylum in Europe – found that needs more important than location 2. Selection by friends / relatives 3. Limited choice v Greater choice 4. Role of financial support 5. Long-term periods of adjustment &amp; support 6. Refusing financial support</td>
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<td>Study</td>
<td>Country/Region</td>
<td>Participants</td>
<td>Recruitment</td>
<td>Data collection</td>
<td>Data analysis</td>
<td>Findings</td>
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<td>10 Conlon (2011)</td>
<td>Ireland</td>
<td>Used Lefebvreian framework to understand the 'everyday' amongst asylum seeking women.</td>
<td>25 females</td>
<td>Recruitment: snowball sampling via migrant centres, social services &amp; newspaper adverts.</td>
<td>Data collection: 1 hour interviews in neutral space or participant homes. Interview schedule: everyday life prior to seeking asylum.</td>
<td>1. Media shape ideas that asylum seekers have about everyday life in Ireland.</td>
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<td>12 Rugunanan &amp; Smit (2011)</td>
<td>South Africa</td>
<td>To explore forced migrant perceptions &amp; experiences around daily lives and survival strategies.</td>
<td>10 females</td>
<td>Recruitment: Initial focus groups &amp; individual semi-structured interviews. Conducted with interpreter (French or Swahili)</td>
<td>Data collection: 3 types of coding used: open, axial &amp; selective. Memo-writing &amp; concept mapping.</td>
<td>Forced migrants are constantly worried about daily survival and are pre-occupied with issues of housing, xenophobia, protection against crime and deportation.</td>
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**LOW QUALITY STUDIES**

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<tr>
<th>Study</th>
<th>Country/Region</th>
<th>Participants</th>
<th>Design</th>
<th>Data collection</th>
<th>Women</th>
<th>Men &amp; women differ in respect to symptoms &amp; coping strategies: Women cope by attending to children.</th>
</tr>
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These 2 papers (O’Sullivan-Lago, de Abreu & Burgess (2008) and O’Sullivan-Lago & de Abreu (2010)) are both based on the same larger study (for a doctoral thesis by one of the authors). Following an initial review of the papers, we found that Study 1 (O’Sullivan-Lago, de Abreu & Burgess, 2008) was based on a sub-section of participants. Study 2 (O’Sullivan-Lago & de Abreu, 2010) had a larger group of participants and added a theme (relating to schooling), but initial themes were the same as those considered in Study 1. Thus, it was felt that it would be possible to review both of these articles in a synthesised way. The quality review incorporates both studies.

** = These 2 papers draw on the same sample and qualitative study (The ‘Leeds Study’) and consider similar themes for the study. Thus, these papers were reviewed together.

**KEY FOR QUALITY RATING:**
A – Purposes & Aims ; B – Literature Review ; C – Design ; D – Methods ; E – Sample ; F – Governance & Ethics ; G – Data Collection ; H – Data Analysis ; I – Credibility ; J – Discussions & Conclusions

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<td>Methods: Participants were recruited from a local community centre. The interview schedule covered a range of topics including coping strategies, family support, and cultural identity. Data were collected using semi-structured interviews conducted by trained researchers.</td>
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<td>A=0</td>
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