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**The well-being of displaced children:  
A qualitative study in the Dutch migration context**

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## **Abstract**

This study explores how forced migration can impact the emotional, social, and physical well-being of migrant children aged 10 to 17 years old. The focus of this study is the northern region of the Netherlands. To participate, children had to be in the Netherlands for at least two years and be accompanied by at least one of their parents. The data was collected through an interactive memory game, designed by the researcher and was based on the needs of the children. Eighteen children participated in the interviews, and the data was transcribed and analysed by themes using ATLAS.ti. The results of the study indicates that in the context of emotional well-being, children most frequently reported emotions such as happiness and pride or sadness and exclusion. Strong friendships were often related to the school setting for younger children and more often occurred within their family for older children. In the context of physical well-being, most children reported good health, although stress related to school was mentioned frequently as well. By introducing children's narratives, this study wants to highlight their perspectives.

**Key words:** Migrant children, emotional well-being, social well-being, physical well-being, children's perspective, interactive play

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# **1. Introduction**

## **1.1. Context and state of art**

Forced migration to safer places due to environmental risk, persecution, or conflicts is an increasingly global phenomenon (Fransen & De Haas, 2021; McAuliffe & Mence, 2017; Kreichauf & Glorius, 2021). Now, trends of forced migration to Europe are at their highest since world war two (Palattiyil et al., 2021). Many West-European countries have become a host country for these displaced families, like the Netherlands.

The Dutch society has dealt with previous periods of migration in the past, mainly throughout the 20th and 21st century. The annual number of refugee influx in the Netherlands was around hundred in 1983. It was only from the 1980 and onwards that the Netherlands counted an increasing trend of asylum requests from refugees from conflict zones like former Yugoslavia or Somalia (Zorlu & Hartog, 2001). In the following years the Netherlands kept welcoming asylum seekers and other migrants. A significant increase in the European asylum seekers found place in the peak period in 2015 and 2016 due to the war in Syria (Connor, 2015). Upon arriving in the Netherlands, asylum seeking families are housed in specialized reception centres spread across the country, called AZC's. Multiple emergency shelters were built to house asylum seekers during the peak period in 2015-2016 due to the high number of new arriving refugees (Van Heelsum, 2017). In 2023, the Netherlands housed 239 reception centres for asylum seekers. In this year, a total of 62.734 asylum seekers lived in these special reception locations. Syrian, male asylum seekers made up a significant portion of these applications, followed by Eritrean, Turkish and Yemini applicants (Bakker et al., 2016). Among these asylum seekers, 12.519 were minors under the age of 18 years. About one-third of these minors were unaccompanied (Nederlands jeugdinstituut, 2024).

The living conditions in these emergency shelters distributed all over the Netherlands were extremely uncomfortable. As a personal property, refugees only possessed a bed, and they were required to share a room with over 20 people. In some cases, they had access to a little kitchen, but more often they only had a microwave available to heat up their food (Van Heelsum, 2017). Moreover, little fights occurred frequently in these shelters because of stress and disappointment about their situation (Van

Heelsum, 2017). On top of that, asylum seekers faced other challenges such as worries about their families left behind in their home countries, theft of phones and money, and overall exhaustion. These factors contributed to an overwhelming sense of not feeling at home (Van Heelsum, 2017). In the peak period between 2015 and 2016, outbreaks of scabies and infections were reported in several reception facilities throughout the Netherlands (Beeres et al., 2018).

The health risks in these reception locations for children extend beyond outbreaks of scabies and other infections. Many children already face health risks even before arrival in the Netherlands. This was often related to disruptions in the health care system, caused by an armed conflict or an unstable political regime, in their home countries. Routine immunizations like vaccines are often unavailable in war-affected zones which leads to lower vaccination coverage among these children (UNCHR, 2022; Meiqari et al., 2017). The ongoing conflicts in countries like Syria and Afghanistans have led to a collapse of the healthcare system which makes it difficult to access essential health services for childhood vaccines. As a result, these children are at an increased risk of diseases that can be prevented, such as measles and Polio (Pavli & Maltezou, 2017). Staying in several refugee camps all over the world with a lack of hygiene facilities, overcrowded facilities and a lack of sleep further expand the risk of infectious diseases (Pavli & Maltezou, 2017). Additionally, during their journey to the Netherlands, children and families were exposed to several other health risks. According to UNHCR (2017), migration routes were exposed with danger and led to dehydration, depreciation of safety, unsanitary living conditions and malnutrition.

On top of physical health risks, forced migration is also connected to several mental health challenges. Multiple studies have shown that migration processes often involve traumatizing experiences particularly for families fleeing from conflict (Vaghri et al., 2019). Examples of traumatizing experience during their migration journey are sexual abuse, exploitation, kidnapping, human trafficking, violence or exploitation (Gülşen et al., 2010; Hou et al., 2019; Siriwardhana & Stewart, 2012). Research that focuses on the mental health of children in such circumstances reveals high levels of trauma and stress upon arrival in host countries (Buchmüller et al., 2018). In the Netherlands, studies have shown similar patterns. For instance, research by Leeuwestein et al. (2024),

who observed that refugee children showed more socio-emotional difficulties, such as anxiety and post traumatic stress compared to their local peers.

The challenges migrant children face does not end after reaching their host country. Upon arrival, they might be protected against all health hazards, but new obstacles quickly arise. Studies by Bunar (2017) and Heckmann et al. (2018) highlight that newly arrived migrants are full of ambition. However, differences in educational levels and a lack of knowledge about the new language makes going to school a complex process. Additionally, migrant children encounter difficulties to adapt to their new cultural environment (Andrade et al., 2023). Things like language barriers frequently limit their abilities to communicate with peers or locals, which makes the school integration process even more complicated. Furthermore, unfamiliarity with the Dutch educational system leads to a feeling of insecurity. In typical circumstances parents can offer guidance and support in such situations, however migrant parents often lack this specific knowledge required to navigate the educational system (Janta et al., 2016).

Adapting to a new society requires social interactions with locals and a sense of belonging, yet this is often challenged by social barriers migrants face (Andrade et al., 2023). By focussing on the current Dutch policies regarding asylum procedures, multiple studies found that these policies often lead to a feeling of exclusion rather than inclusion (Kos et al., 2015; Rijkschroeff et al., 2005; Siebers & Dennissen, 2014). For instance, the frequent relocation of families between facility centers prevents children from forming long lasting inner connections with friends and neighbours (Goosen et al., 2013). A study done by Parker et al. (2014), highlights that friendships and social bonds are crucial for children's well-being. Additionally, these frequent relocation takes away the possibility of consistent education, which can lead to further distancing themselves from forming strong connections with their peers (Hos, 2016). Some policies further increase these challenges by prioritizing short-term housing over long-term integration. This highlights the struggles to be welcomed or accepted within the community of the Netherlands. Such exclusion only reinforces the challenges migrant children face in adapting to Dutch culture. However, little is done by the Dutch society to facilitate the migrant children's needs. This one-sided expectation from the host society is contrary to the principle of the Best interests

of the child mentioned in the Convention of the rights of the child stating that a child has the right to education (article 24.2.E), no discrimination (2.1) and a stable living environment (27.2)

## **1.2. Deficiencies in the literature**

Many studies often address challenges like language barriers and access to education. However, less research is focused on the long-term effects of the integration process, social mobility and mental well-being in adulthood. Additionally, existing policies mainly prioritize short-term needs of asylum seekers and their children, but they currently overlook their long-term needs and the well-being of these migrants.

Furthermore, the existing literature is mainly focused on children's well-being after forced migration in the greater context. Most studies are focused on a part of the world, or country specifically. When looking at the Netherlands, mainly the densest areas around the big cities are included in these studies, however the existing literature lacks an in-depth analysis of the northern region of the Netherlands.

Lastly, in many studies children's voices are often left out. Studies mainly focus on analysing children's challenges or well-being from the perspective of education, policies or caregivers rather than the perspectives of migrant children themselves.

## **1.3 Research question**

By putting the voices of the migrant children as the main priority, this study aims to explore the well-being of migrant children who were forced to migrate to the northern region of the Netherlands. Specifically, it investigates the emotional, social and physical well-being of these children by focussing on their experiences. The central research question guiding this study is: *How does forced migration impact the emotional, social and physical well-being of children resettling in the northern region of the Netherlands?*

## **2. Theoretical framework**

### **2.1 Theoretical foundation for Children's well-being**

Children's well-being is a complex process that consists of multiple concepts. Within the concept of Children's well-being, UNICEF (2007) defines six important domains: Material well-being, health and safety, education, family and peer relationships, behaviour and risks and subjective well-being. Save the Children (2017) views well-being more in terms of social, emotional well-being and puts the focus on learning. Similarly, Ben-Arieh et al. (2013) combine objective indicators as access to school and healthcare with subjective indicators as life satisfaction and emotional stability to define children's well-being. Together, these frameworks underline the concept of children's well-being being a multidimensional concept formed by interaction of emotional, social and physical factors. These perspectives are particularly important when looking at the context of forced migration.

Before looking at the context of forced migration, it is essential to define the meaning of forced migration. In this study, forced migration is defined as '*coerced or involuntary movement from one's home*' (Reed et al., 2015, p.605). According to the European Commission (2017), forced migration occurs when individuals are in need to leave their home country due to persecution, conflicts, violence, human rights violation or the effects of climate change. In this study, the focus will be solely on forced migration caused by conflicts such as war.

#### *2.1.1 Children's well-being in the context of forced migration*

Children who experience forced migration often experience multiple challenges that affect different parts of their well-being. Many migrant children must deal with challenges as violence (Hou et al., 2019; Siriwardhana & Stewart, 2012) and long periods of uncertainty or living in poor living conditions (UNHCR, 2017). These events not only affect the physical well-being as the event occurs but also affects their emotional well-being later in life (Bernhardt et al., 2024).

According to Park et al. (2022) emotional well-being is more than just the absence of negative feelings. It also refers to feelings of security, hopefulness and being valued. It highlights children's ability to understand and manage their emotions and their abilities to cope with stress. Emotionally well-being is particularly important for migrant children, as they have a higher chance of experiencing stressful life events due to migration (Andrade et al., 2023). These emotional challenges are often linked to the social well-being of migrant children. Social well-being is mainly shaped by relationships at school, at home, and within the broader community (Milton et al., 2023). Forming new connections and interacting with peers is harder for children who were forced to migrate to another country and they often lost their close connections from back home (Hos, 2016). Lastly, to define the well-being of the children in the context of forced migration, it is important to look at their physical well-being as well. Physical well-being is closely linked to physical activity, but also includes nutrition, clean and safe environments and their access to healthcare systems (Capio et al., 2014). These factors are also important to look at, since a clean and safe environment were not always offered within the reception facilities as mentioned in the introduction. Bronfenbrenner's ecological system theory (1994) will help to connect all these different parts of well-being together.

## **2.2 Ecological system Theory**

The ecological system theory was originally found by Bronfenbrenner in 1994. This theory shows child development being present within five systems of influence. The systems consist of the microsystem (family, peers or school), the mesosystem (interactions with the microsystem), the exosystem (institutions that indirectly affect the child), the macrosystem (cultural norms, laws or ideologies) and the chronosystem (influence of time). According to Bronfenbrenner, these systems are not isolated from each other but interact continuously. Each child's development is shaped by an unique combination of these environmental and relational

layers. The interplay between these systems influences the opportunities a child must participate within the society. This theory helps to understand the complexity of the well-being of migrant children by showing that their development is shaped by multiple, interaction layers of their environment (Marcos et al., 2024).

The microsystem is viewed as the closest system to the child which includes interactions with parents, siblings, teachers or other caregivers. Migrant children often experience disruptions in this system due to migration such as separation of their families, particularly fathers, who might be the first to undertake the migration journey in advance of their families. Children remain supported by their mother in many cases while waiting for the procedure to reunite with their fathers. This process often takes several years to complete (Spitzer & Torres, 2023). Another system that is closely related to migrant children's well-being, is the exosystem. Although the child does not directly participate in this system, it still affects their daily life. For instance, the ongoing migrant policies and the (local) government's decisions like the shortage in the reception facilities (Van Heelsum, 2017) or the compulsory education for all children between the age of 5 and 16, including migrant children (Bilgili, 2019).

### **2.3 Children as an active agent**

Adding to Bronfenbrenner's theory, the new sociology of childhood presents children as a constructor of meaning to their daily lives. Although the new sociology of childhood cannot be viewed as a theory itself, rather as a broader approach, this approach still shares valuable insights on how to view the well-being of migrant children.

Central in this approach is the recognition of children as an agent (James & Prout, 2003). Children are often viewed as vulnerable or in need of protection in the current migrant policies. Although these concerns might be true, it can also influence children's view of the world. Therefore, the concept of children as an active agent highlights the importance of an active role

for children while discussing their well-being. In this study, the new sociology of childhood will be present by creating this role of agency for the child. Furthermore, this study will build upon the principle that children's voices must be taken seriously in research (12, United nations convention on the rights of the child 1989). The New sociology of childhood will create a foundation for the child-centred methodology in this study, that ensures a space for children to express their feelings in a way they feel comfortable. This approach asks for a sensitive view to cultural backgrounds. The concept of interculturalism will help to apply this view.

### *2.3.1 The role of Interculturalism*

Interculturalism is focussed on the dynamics between the rational understanding and diversity. As the council of Europe, 2008, states: diversity should be viewed as a resource to embrace, rather than a problem. Meaningful encounters between people of different backgrounds are essential in building trust, reducing prejudices and strengthening social cohesion. This process should be two sided: The host society must adapt in a way that recognizes cultural differences. Interculturalism is specifically relevant in the context of migrant children, since they often grew up within two cultural perspectives at the same time: first the one of their families with their cultural heritage, and secondly the new culture from their host country. For these children, interculturalism is part of their daily lives. It shapes how they are perceived within the school setting, how they form their friendships and in the way they are expressing their identity (Rizkalla et al., 2020).

## **3. Methodology**

### **3.1. Methodological approach**

#### *3.1.1 Research Design*

This study used a cross-sectional qualitative research design to collect data at one point in time to investigate the well-being of children in the age of 10 to 17 years old who experienced forced

migration. The qualitative design was chosen to examine the subjective experiences of these children, because a qualitative design allowed the children to express their feelings in their own words. A purposive sampling approach was used to target the participants. This was done within the researcher's own social network (Campbell et al., 2020). The background from the participants was either Syrian or Eritrean. The main data collection instrument was a custom-designed interactive game based on the idea of memory. The game was specially developed to engage the children with the goal to provide an in-depth insight of their well-being. Additionally, a semi-structured interview guideline with predetermined questions was linked to the memory game. As soon as a child turned over the memory, the questions linked to the memory theme was asked. This guideline was developed to make sure every child was asked the same questions.

The target population for this study included children who experienced forced migration to the northern region of the Netherlands. Eligible participants were between the age of 10 and 17 years old. This age range was chosen, since recent research showed that children in the age of 10 to 17 years old are in the developmental stage to understand the challenges and support, they need during resettlement (Van Der Ent et al., 2024). In the same study Van der Ent et al. (2024) stated that it is crucial to decide on a minimum length of stay to evaluate the long-term integration experience. For this study, the guideline from Van der Ent et al. was followed, and therefore eligible participants had to meet the criteria of being in the Netherlands for a minimum of two years. They also had to no longer live in reception facilities. To meet the last inclusion criteria for this study, it was important for eligible participants to be accompanied by at least one of their parents while coming to the Netherlands. This criterion was added due to ethical and practical consideration. Unaccompanied minors are viewed as vulnerable in research contexts (Taha et al., 2024; Thomas, 2003). Therefore, stricter ethical guidelines are connected to research with unaccompanied minors. Furthermore, while doing research with children, it is always important to ask informed consent from both the parent and the child. When a child was unaccompanied when coming to the Netherlands, it is harder for the researcher to obtain this informed consent from their parents.

### 3.1.2 Variables and instruments

In this study, the focus of the research is to gain insight in the well-being of children who experienced forced migration to the Netherlands. To ensure engagement and communication on their own level, the research instrument was designed to align with the skills and experiences of these children (Fargas-Malet et al., 2010; Flanagan et al., 2015). Therefore, a custom game for the data collection was designed based on the idea of memory.

Prior designing the game, key themes linked to well-being were identified by the researcher. The definitions of well-being from UNICEF (2017) and Save the Children (2017) were the main inspiration for the key themes as well as previously used tools and questionnaires to assess children's well-being. These instruments offer a guide to measure subjective well-being through the lens of children themselves. Questionnaires such as the KINDL-R (Bullinger et al., 2008), KIDSCREEN (Ravens-Sieberer et al., 2013) and the PedsQL (Bastiaansen et al., 2004; Varni, 1998) are the most common used in quantitative studies. These questionnaires include factors like emotional well-being, social-relationships, school functioning, and physical health. Additionally, the Refugee Services Core Stressor Assessment Tool (Davis et al., 2021) was used to look into key themes especially focused on migrant children. Although this study did not use these tools quantitatively, their structure and domains are the inspiration of designing the memory game.

Each identified theme was linked to a picture representing the theme. All identified themes fit within the three primary categories: (1) social well-being, (2) emotional well-being, and (3) physical well-being. For example, family was a commonly used theme in the questionnaires. Therefore, a picture of a family was copied from the internet. This picture was printed twice and glued onto two pieces of squared cardboard. This piece of cardboard then represented the memory card of the family during the game. Next, the researcher identified questions linked to family based on the previous mentioned questionnaires. For the category family questions like *'Do you get along well with your parents/sibling(s) and why?'* and *'What do you like about your family?'* were used during the game. These questions were asked as soon as the child completed the memory of the family. The final design

of the memory game, such as which themes were linked to the primary categories, the questions linked to the pictures and the inspiration of the questions are added in appendix 5 of this study.

While asking the questions from the interview guideline, a natural conversation ensued. Therefore, multiple themes that were not directly linked to the interview guidelines, were mentioned during the interview. As a result, topics like the news were discussed as well. For example, the memory related to the topic of home, children were asked about their home in the Netherlands, but also about their home countries. In this conversation the topic of the recent news articles occurred. When talking about their home country, one girl mentioned the recent news articles posting that the war in Syria could end soon. This topic was not included in the interview guide; however the topic occurred naturally within the conversation. Another example was a girl turning over the memory card related to school. A question tied to the topic of school was if she had any friends at school. She mentioned that she didn't feel like she had real friendships at school. However, she brought up a new conversation immediately about her preference for spending time with her parents and siblings at home. This shows that some of the cards were intertwined with each other and that some topics were already discussed before turning around the memory card related to the topic.

Before starting the game with the migrant children, a pilot was used to test out the cards and questions with Dutch, non-migrant children. The trial consisted of three children in the age 9 to 14 years old to represent the target age used within this study. All three children participating in the trial were girls. The trial revealed that the previous designed game was too long, lasting about two hours. Which resulted in removing multiple memory combinations that were too hard to answer for these children. Examples of removed combinations were a love heart connected to the question '*What does love mean to you?*', and a picture of a scale connected to the question '*do you feel like you can balance school and social life well, and why?*' Additionally, the picture of a broken heart connected to the question '*Can you describe a moment where you felt emotionally overwhelmed?*' was removed since this question assumed there was a time in life where the child felt emotionally overwhelmed. To make sure the final game did not take two hours, the researcher did not participate in the final game, which was the case during the trial.

The trial also learned that the materials used for designing the game were too fragile. For the trial, pictures were printed on paper and were easily damaged during the game. Therefore, for the final game with the migrant children, pictures were printed on cardboard instead of paper. The children also suggested adding multiple ‘fun’ questions to the game. Fun themes included money, pets and food that are not directly linked to the concept of well-being. Questions that were linked to these key themes were *‘what is your favourite food and do you get to eat this often?’*, *‘If you had a lot of money, what would you like to buy and why?’* and *‘Do you have pets, if not would you like to have a pet, and why?’*

### 3.1.3 Procedure

The researcher developed a game suitable for children who had lived in the Netherlands for a minimum of two years prior to participating. This criterion ensured that participants were at least a bit familiar with the Dutch language. Before starting the game, children were asked whether they preferred to play the game in private or in the presence of their parents.

For this research, purposive sampling in the researcher’s own social circle was used (Campbell et al., 2020; Etikan, 2016). The researcher already met three migrant families within her hometown and surrounding areas through volunteering by the local youth organisation, where the migrant children were part of the project as well. The other families were met through informal tutoring sessions to improve their Dutch language. The parents of potential participants were approached to consent to their child’s involvement. Upon approaching, parents received a consent form detailing the aim of the study, the confidentiality of their child’s responses, and their right to withdraw from participation at any time. To ensure that the parents or legal guardian understood the consent form, the form was provided in both Dutch and their native language. Translating these forms into the native language was performed by a native speaker.

Before the game started, children were informed about the study’s objectives and consented to the recording of their responses. Additionally, two children who were unfamiliar with the rules of memory, got the instructions. They learned the game quickly by playing with their brothers and sisters. Since this research was not focused on playing the game, but rather about the answers that were given, there was no intervention needed when the child did not play by the rules of the game. Each session

lasted approximately 60 minutes and were all performed in Dutch. For some participants this duration was too long. Mainly the younger children lost interest towards the end of the game, since they rushed to finish the last memories and answered questions only with yes or no. However, for several older children the game felt to short. They shared their wish to continue the conversation after the game.

### *3.1.4 Data analysis*

The analyses began with descriptive data that provide an overview of participants' demographic background, focussing on gender, age and ethnicity of the children. Next, the responses were transcribed word for word to ensure authenticity of the children's answers. Subsequently, the transcribed interviews were imported in ATLAS.ti to discover recurring patterns and themes.

A systematic coding process was used in ATLAS.ti, where responses were analysed in depth. This was done through an inductive coding approach, since there were no fixed sets of codes to search for initially. After applying the codes, the data were categorized into the three main key themes: social well-being, emotional well-being and psychological well-being. To do this, words used in the questionnaires that are linked in appendix 1 to 4 were searched for within the data. In case answers did not fit one of these key themes, they were labelled as 'other'. Further exploration within these primary themes, showed sub-themes, allowing for a more in depth understanding of the data. All sub themes and codes are shared in appendix 6. Representative quotes were then selected from the data to support the findings within this study.

## **3.2 Ethical considerations**

### *3.2.1 Informed consent*

When working with children, it is essential to ask parents for consent. Therefore, a comprehensive consent form was provided to the parents before the data collection process started. This form had to be signed by the parents to start the game. Equally important was to obtain consent from the child itself. Therefore, all children were asked for consent as well prior to the game. The participants all voluntarily

participated, and the children had the right to refuse or withdraw at any time during the data collection process.

### *3.2.2 Confidentiality and privacy*

To protect participants' privacy, the data was anonymized during storage, analysis and reporting. Each child was assigned a number in the results section to ensure confidentiality. The collected data was securely stored within the private online environment of the University of Groningen and only accessible to the researcher of this study (Lopez, 2013).

### *3.2.3 Minimizing harm*

Research that involved forced migration and experiences linked to forced migration like this study, required an empathetic and cautious approach. These children often experienced some kind of trauma, instability or discrimination (Gülşen et al., 2010; Vaghri et al., 2019). Therefore, it was important to acknowledge this sensitivity during the whole process to make sure children felt safe and respected to share these experiences. The researcher also made sure to tell the children that they were allowed to skip any question if they did not want to answer at any time. Additionally, they were also told that they were allowed to take a break whenever they needed. However, no child ended up needing a break or skip a question while playing the game. Lastly, they were able to quit the game when they did not feel like continuing anymore without any consequences.

To foster trust and a supportive environment while engaging with the children, a brief and friendly conversation was used as an ice breaker before starting the game in which light topics like daily life were part of the conversation. Right after the small talk, children were asked about their characteristics. The researcher held a non-authoritative and approachable attitude towards the children during the whole game. Finally, to ensure no harm was done, this study was approved by the supervisor to ensure that this study respects participants' rights and mitigated all risks linked to the children's well-being.

### **3.3 Positionality**

When starting this study, I already had prior experience working with children, including migrant children. This experience helped me to create a certain level of empathy and sensitivity to approach these children. However, while my prior experience gave me the basic understanding of the struggles these migrant children might face, I am well aware that this could be a disadvantage for the current study, because of the risk of confirmation bias. To minimize this bias, I made sure for children to express both positive and negative feelings, without leading them in any particular direction.

Furthermore, I acknowledge that I am 22 years old, white, university student that has different levels of privilege. I have never experienced forced migration myself or felt any kind of exclusion within Dutch society and I have never been in a position where people do not understand me because I do not speak the dominant language. Although I tried to recreate a similar kind of experience by studying Arabic proficiency within my bachelor's degree, and I always felt very nervous for my oral exams, I am well aware that this is still far away from a similar experience.

Additionally, I had to share my position as a university student prior to the interviews with the children and their parents. My identity as a white university student might have influenced what they felt comfortable sharing. While I tried to reduce the power dynamics as much as possible by interaction through an informal play, I remain aware that power dynamics can never be fully eliminated.

## **4. Results**

The results presented in this section are based on the data collected in a total of eight interviews. All interviews took place within the family setting, which resulted in siblings participating together. This led to a final sample of 18 participants whose responses met the age criteria. While some younger siblings also expressed interest and engagement in the game, they were too young to include their answers into the findings. Therefore, their responses were excluded from the final data analyses.

At the beginning of each interview, participants were asked about their gender, age and country of origin. The question of how long the participants had been in the Netherlands also

emerged somewhere during the interviews. Table 1 shows an overview of these demographics from each child individually, grouped by their family. Additionally, each participant was assigned a number in this table. When a certain participant is mentioned in this section of the thesis, the number refers back to the number the participant got assigned in table 1. Most participants were from Syrian origin, only five children were from Eritrea. The sample includes both boys and girls, where girls are overrepresented.

**Table 1**

*Overview of Participants Demographics*

	Number Child	Gender	Age	Country of origin	Year of arrival Netherlands
<b>Family 1</b>	1	Boy	17	Syria	2015
	2	Girl	12	Syria	2015
<b>Family 2</b>	3	Boy	11	Eritrea	2018
	4	Girl	13	Eritrea	2018
<b>Family 3</b>	5	Boy	10	Syria	2020
<b>Family 4</b>	6	Girl	15	Syria	2022
	7	Girl	12	Syria	2022
	8	Girl	10	Syria	2022
<b>Family 5</b>	9	Girl	17	Syria	2021
	10	Girl	15	Syria	2021

<b>Family 6</b>	11	Girl	15	Syria	2021
	12	Boy	12	Syria	2021
<b>Family 7</b>	13	Girl	17	Eritrea	2019
	14	Girl	17	Eritrea	2019
	15	Girl	15	Eritrea	2019
<b>Family 8</b>	16	Girl	17	Syria	2021
	17	Girl	15	Syria	2021
	18	Boy	12	Syria	2021

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#### 4.1 Emotional well-being

The emotional well-being of the children taking part in this study varied widely depending on their age, year of arrival in the Netherlands, their family situation and their social environment. However, some recurring emotional themes were present in each interview, such as happiness and pride, exclusion, sadness, and hope. These emotions were presented to the children by the researcher. During the game, children talked about these emotions, however the researcher always indicated certain emotions by asking them questions like ‘*what makes you happy?*’ ‘*When do you feel proud?*’ or ‘*What do you do when you feel sad?*’

##### 4.1.1 happiness and pride

Feelings of happiness were most often associated with their families or friends. As well as activities with cultural meaning, like travelling. Travel was one of the most mentioned

sources of joys for all participants. Most children talked about domestic travels within the Netherlands. For example, family 8 who do have relatives living in other cities like Utrecht, Rotterdam and Den Haag. Although, they feel disappointed that they were placed in the Northern region of the Netherlands, all three kids mention that they feel happy while traveling:

*“Tijdens de vakanties kan ik met de trein naar mijn familie, wat mij blij maakt. Ik vind het fijn om in een veilig land in Nederland te zijn waar dit toch mogelijk is samen met mijn familie. Ook al wonnen zij in grotere steden dan ik, ik voel me toch altijd erg fijn als we weer op bezoek kunnen.”*

*“During the holidays we are able to take the train to visit our family members, which makes me feel very happy. I like it to be in a safe country like the Netherlands together with my family members. Although they are living in big cities, and we’re not, I still feel very blessed to be able to visit them without any difficulties.”*

Since family 1 has been in the Netherlands since 2015, the parents have obtained legal status within the Netherlands. This makes them eligible to travel outside the Netherlands as well, which can be viewed as a privilege. One of their children (12 years) stated:

*“Reizen vind ik fijn. Ik ben al naar Dubai, Oostenrijk en Egypte geweest. Dubai vond ik het leukste, omdat ik daar familie heb leren kennen die ik nog niet eerder had gezien zoals mijn tante. Ik vond het hier zo leuk dat ik hier graag zou willen wonen als ik groter ben.”*

*“Traveling makes me happy. I’ve been to Dubai, Austria and Egypt. Dubai stood out for me the most, since I was able to reconnect with family I never met before, like my aunt. I liked this place much that I decided that I want to live in Dubai when I grow up.”*

Children smiled while they spoke about their ambitions or successes. Children mostly mentioned being proud of school achievements and language improvements. Several children mentioned how they learned Dutch quickly by attending classes at a Dutch school. At first this was a scary experience, but now they all talk about it with a smile on their faces. Other children shared being proud of religious commitments, like fasting during Ramadan. For child 11 (15 years), it was her first year of Ramadan:

*“In het begin was Ramadan lastig voor mij, maar naar een tijdje ging het makkelijker. Ik genoot van het vroeg opstaan en het samen eten met mijn familie. Het voelde heel speciaal om wakker te zijn voor de rest van Nederland.”*

*“At first it was hard to participate. But after a while, it became easier. I enjoyed every moment waking up early to eat together with my family members. It just has something magical being awake while the rest of the Netherlands was asleep.”*

#### 4.1.2 Exclusion and sadness

Participants also discussed experiences feelings of exclusion and sadness. Many described schools as a place where those experiences happened. Girl 2 (12 years old), explained:

*“De jongens op school onderbreken mij altijd als ik praat. Als dit gebeurt voelt het alsof ik gewoon niet besta en dat maakt me verdrietig.”*

*“The boys at school always interrupt me when I talk. When they are doing that, it feels like I don’t exist, and this makes me feel sad.”*

Experiences such as these made her feel sad. It also gave her a feeling of exclusion, since she mentioned that the boys only show this kind of behaviour towards her and not towards

her other Dutch classmates. Many children shared these kinds of emotions at school. Multiple girls described other peers ‘*whispering or staring*’ at them. Some even reported that others would not sit next to them or refuse to share materials.

Religion served as an important part of daily life. Children described fasting, praying and religious holidays as being the most meaningful to them. Although being a Muslim can also be challenging, especially in work or school settings. Boy 1 also stated that it makes him sad that the Dutch society doesn’t seem to care about Muslims. Mosques are only found in the big cities and getting extra time to pray during the day is non-negotiable. This leads to feelings of exclusion within Dutch society. As boy 1 stated:

*“Ik ben een moslim wat betekent dat ik vijf keer per dag zou moeten bidden. Maar, ik ben veel van mijn tijd op school of werk. Zij vinden het niet goed als ik extra pauze neem om te gaan bidden. Daarom bid ik extra als ik thuiskom.”*

*“I am a Muslim which means I have to pray five times a day. However, I spend most of my time at school or work. They don’t agree with me taking extra breaks to pray. Therefore, I just pray extra when I come home.*

#### *4.1.3 Hope*

Hope for the future contributed significantly to the emotional well-being of these children. Children who had a clear vision in mind for their future, whether they wanted to become a nurse, police officer, influencer or business owner, described their future with a smile on their faces. Hope related to their home countries was also important. All individuals mentioned that they hoped that the war would end soon, and they all expressed their desire to return one day after the researcher asked them if they wanted to return or not and if possible, they would love to build their future there. While asking this question, Child 17, a 15-year-old, Syrian girl, explained that she was following the news lately:

*“Op het nieuws lijkt het dat de oorlog bijna over kan zijn. Ik hoop echt dat het snel genoeg veilig is zodat ik mijn vrienden en familie in Syrië weer kan zien.”*

*“The recent news makes it seem like the war can be over soon. I really hope this will be the case so I can see my friends and family in Syria again.”*

Although they really appreciate Holland, for instance the safety over here, their desire to go back dominated. The motivation for wanting to go back varied among the participants. Some of the children who had arrived more recently expressed their struggles with the Dutch language and preferred to communicate in their mother tongue. Others mentioned the emotional connection to their country of origin by expressing a deep wish to be reunited with their relatives who remained abroad.

## **4.2 Social well-being**

Many participants described strong family bonds. However, friendship and school situations showed great differences within their experiences.

### *4.2.1 Friendships and social interaction*

The experiences in terms of friendship and social interactions vary enormously within the participants. Younger children between the age of 10 and 13 years old were more likely to report close friendships that emerged after arriving in the Netherlands. When these younger children were asked what close friendships meant to them, they described close friendships as ‘often play with each other’ or ‘sitting next to each other in class’. For example, child 3 (11 years old) describes his bond with his friends during the breaks at school.

*“Pauze vind ik het leukste aan school. Ik ga dan altijd voetballen met mijn goede vrienden. Soms hebben we wel ruzie, maar dat hoort eigenlijk bij het voetballen.”*

*“The break time is my favorite part of school. I always choose to play football with my closest friends. Sometimes we do argue, but that is basically part of football”.*

However, not all participants do enjoy their time at school, such as girl 2, 12 years old. She explained:

*“ Op school, laten we zeggen dat we tosti's gaan eten, dan zijn er altijd twee klasgenoten die ze mogen brengen naar de rest van de klas. Wanneer het dan tijd is om naar mij te brengen, voordat ze dat doen gaan ze hun handen wassen alsof ik vies ben ofzo. En of er iets mis met mij is. Dit doen ze alleen als ze eten naar mij brengen en dat maakt me echt verdrietig.”*

*“ When I am at school - let's say we eat toasted sandwiches - then two peers are allowed to make them and bring them to the classmates. When it's time to bring it to me, but before they do, they wash their hands, like as I am dirty. As if there's something wrong with me. They only wash their hands before handing out the food to me, which makes me really sad.”*

She reported that small acts like this pile up over time, resulting into a reduced feeling of confidence and trust. This is a shared frustration between all participants. Many participants felt that teachers failed to intervene during bullying incidents. Child 2 explained:

*“De jongens pesten mij alleen als de juf niet kijkt. Daardoor is het moeilijk voor mij om te bewijzen dat ze mij pesten. Mijn juf zegt er dan wel wat van, maar natuurlijk ontkennen ze. Daarom worden ze nooit gestraft.”*

*“The boys only bully me when our teacher is not looking. Therefore, it is hard to prove their acts. My teacher does ask the boys, but of course they always deny. That’s why they are never punished.”*

Despite these feelings during school, she proudly shares that she was the one to be selected to play the lead role in the group 8 musical. A few of her peers expressed feelings of jealousy, but for her, this feels like an opportunity as a joyful and meaningful ending to her time in primary school. She is determined to give the best performance to date. Furthermore, she is eagerly looking forward to starting highschool in a few months. *“Dit voelt als een nieuwe start en een kans om opnieuw te starten”* *“This feels like a fresh chapter and an opportunity to leave this time behind”*, she shared with a big smile on her face.

For the older children, and thus children who arrived in the Netherlands at a later age, it was more challenging to form lasting friendships with their peers. For instance, the children from Family 8, migrated to the Netherlands in the year 2021. At that time the children were in the age range of 9 to 12 years old. None of the children spoke Dutch at the time, which made it even more difficult for them to start connections with their peers. To worsen this situation, 2021 was the year after the outbreak of the corona pandemic. During this period, schooling was still partly remote. Only half of the schooldays, these children were allowed to attend classes in person. The other days, these children were homeschooled. For many of the participants, home-

based learning created extra challenges due to language barriers and limited support from home.

Despite these difficulties, children highly valued their friendships. While few participants mentioned that they had no real friendships at school, they managed to find friendships through sports, their part-time jobs, with children in their neighbourhoods, or through social media like Instagram and snapchat. One girl, participant 16, mentioned that she doesn't mind having real friendships at school. She much rather spends her time alone or with her family members since they share the same values. She mentioned:

*‘‘Het is even leuk om met mijn klasgenoten te zijn, maar ik merk dat we niet dezelfde normen delen. Mijn klasgenoten vinden het leuk om naar feestjes te gaan en alcohol te drinken, terwijl ik dat niet mag omdat ik moslim ben.’’*

*‘‘When I am hanging out with my peers at school, this is fun for a little bit. However, I notice that we don't share the same values. My peers like to party and drink alcohol, while I am not allowed to party or drink because I'm a Muslim’’.*

#### 4.2.2 Family bonds

An aspect that emerged in all interviews was the role of the children as informal interpreters for their parents. At least one of the children in each family expressed that they frequently assist their parents with translating Dutch to their mother tongues. Conversations where parents mainly need help with translating are school-related topics, doctor's visits, or daily activities like shopping or dealing with the mail. For all participants, this responsibility feels like a natural part of daily life. They are glad to be able to give something back to their parents in this way.

All participants described their family as a safe and stable place and even sometimes their families were the only place where they felt fully accepted. Children used the words 'love',

‘trust’, ‘real’ and ‘friendly’ to describe their family members. As child 1, boy 17 years old mentioned:

*“Ik woon meestal met mijn broer hier om de hoek, maar ik vind het altijd leuk om bij mijn familie te zijn. Familie betekent liefde. Ze zijn er altijd voor je en doen niet nep. Mijn ouders willen mij altijd helpen als ik dat nodig vind.”*

*“I am mostly living with my older brother around the corner, but I am always happy to be around my family. Family is love. They are always with you, they’re not acting fake. My parents are always there to support me when I need help.”*

The households of these children often included multiple siblings. While this might contribute to a sense of closeness and a sense of shared values, it can also be challenging. Many children must share a bedroom with one or two siblings, which results in limited personal space. While many children wished for their own bedroom, participant 11 (15 years old), framed her experience with sharing a bedroom as a mainly positive experience:

*“Ik woon met mijn familie in een klein appartement. Soms zou ik meer privacy willen, maar ik vind het ook leuk de relatie die ik nu met mijn zus heb. We werken samen aan huiswerk, delen onze kleren en make up en praten veel voordat we gaan slapen.”*

*“I am living with my family in a small apartment. Although I wish for a bit more privacy sometimes, I like the way my older sister and I have a relationship right now. We work together on our homework, we share clothes and make up, and we talk a lot before falling asleep”.*

While older siblings were important as a role model, younger siblings were often viewed as playmates. For instance, participant 3 (10 years old) and his younger brother. Although his

younger brother was too young to be included in these results, participant 3 specifically asked permission for his brother to be part of the memory game as well. At first both guys were a bit shy and weren't sure how to reply to the questions, but as the game progressed, the rivalry became noticeable. The questions didn't matter anymore, and their only goal was to beat the other. This resulted in destroying the game, which made the researcher decide to quit. Although the game had ended, the boys expressed their desire to continue the interaction while playing football. During this informal play, a noteworthy observation was made. While playing football on the streets, an important topic emerged: their fear of the neighbour. The boys explained that multiple previous incidents, where their football ended in their neighbours yard, had caused an aggressive response from their neighbour. This situation repeated itself during the informal football match. Shortly after the ball entered the yard, the neighbour came outside and addressed the situation in a highly aggressive manner - again -. Despite the apologies from both boys, the situation escalated. The neighbour directed her aggression towards the adult, in this case the researcher, while stating that she does not like having 'non-Dutch neighbours'. The boys were shocked and later shared that these kinds of interactions are not uncommon, which highlights the exclusion and racial prejudice some children have to deal with in their daily lives.

#### *4.2.3 community support*

Additionally, some children showed moments of connection and support within a broader community. These community spaces include mosques, their part-time jobs and local events. In certain neighbourhoods, children were able to develop relationships with other families from similar backgrounds, which contributes in a positive way to their social well-being. Child 4 (13 years old) mentioned specifically that she liked to be part of her church community where they sing, dance and eat together every Sunday. Such interactions helped her, specifically in the beginning of her time in the Netherlands. She stated that being around people with the same cultural background helped her navigate in a totally new environment.

This helped her reduce feelings of isolation, since she had the feeling that Eritrean refugees were not always accepted within the Netherlands.

Some children struggle with their language skills in their communities. Child 10 (15 years old) experienced the language barrier at her part-time job in the supermarket. She described how her manager told her that her Dutch level is not sufficient:

*‘Ik was gewoon mijn werk aan het doen. Mijn manager zegt tegen mij dat ik moet schoonmaken. Toen kwam iemand anders naar mij, en zegt komt mee. Je moet iets anders doen. Ik ging uitleggen dat ik deze taak had, maar hij begreep het niet. Daarom zei hij dat ik iets anders moest doen en ik ging dat maar doen. Paar minuten later werd mijn manager boos op mij, omdat ik mijn taak niet had afgemaakt. Hij zei dat mijn Nederlands niet goed genoeg was om mijn taken te begrijpen. Ik voelde me zo stom toen.’*

*‘I was doing my job. My manager told me I had to clean something. Then someone else came up and said to me, no come, I have a different task for you. I tried to explain to him that I was already doing another task, but they misunderstood me. So he told me to do something different, so I just did. Few minutes later, my manager became angry at me since I didn’t finish my assigned task. He was convinced my Dutch level was not sufficient enough to understand my tasks. I felt so stupid at that moment.’*

## **4.3 Physical well-being**

### *4.3.1. General Health*

While most of the children reported feeling physically healthy, one narrative told another story. One girl in the last family shared her story in relation to her asthma. For this girl, her serious health concerns significantly impacted her daily functioning:

*‘Ik moest vroeger vaak naar de dokter. Die bleef zeggen dat het niet erg was. Maar ik kon gewoon vaak niet ademen. Eindelijk zeiden ze ga naar het ziekenhuis en daar kreeg ik medicijnen. Helaas betekent dat ik dit elke dag moet slikken. Dit was wel heftig.’*

*‘I used to go to the general practitioner very often. They kept saying it wasn’t a big issue. But multiple times I couldn’t breathe. Eventually, they told me to go to the hospital, and there I received medication. Unfortunately this means I have to take this medication every single day. This was intense.’*

She continued with explaining how her situation affected her daily life at the moment. She will be turning 18 years old soon, which means she will be responsible for her own medical costs. The insurance will cover the costs of these medicines; however, she first has to pay for her own risk. She highlights that a situation like this causes a lot of stress for her in the future.

Other participants reported good health and regular access to the Dutch healthcare system. Their stories contain regular check-ups, vaccinations or minor injuries.

#### *4.3.2. Physical activities*

For many children, physical activities were highly valued. Football was the most mentioned sport, followed by fitness and kickboxing. Some of the children get the chance to participate in after-school-sport-activities, while others are going to the gym by themselves.

Mainly the younger children were enrolled in after-school-sport-activities. Some of the older children did express that they would have liked to be part of a sports club, however limited economic resources made it impossible. Therefore, they try to stay active while running outside for free. Additionally the children in the age range 15 - 17 years reported to use physical activities to keep them distracted from daily life. Child 9 (17 years old girl) quotes:

*‘‘Ik heb maar beperkte mogelijkheid om te sporten. Maar, ik vind het belangrijk om te bewegen, omdat het mij helpt tegen stress. Vooral deze dagen nu ik mijn examens heb. Deze periode voel ik me veel gestresst en sport helpt mij af te leiden.’’*

*‘‘I am limited in my possibilities to exercise. However, I do find it important to sport, since it helps me to experience less stress. Especially nowadays when I am working towards my final exams. This period is very stressful for me and exercising helps me to keep myself distracted.’’*

Not only stress about exams, also stress and anxiety related to migration, social expectations and educational pressure were mentioned. When interviewing family four, the oldest girl expressed her wish to become an aesthetician. This career goal was not supported by her parents, who believed that ‘MBO’ was insufficient. They expected their daughter to at least attend university here in the Netherlands. The girl shared that this ongoing tension with her mother led to feelings of insecurity and stress, which resulted in headaches. She felt let down by her parents since they do not celebrate her successes at school like her little sisters. In her opinion her parents don’t understand that she is trying her best to learn the Dutch language but fails to qualify for university since she doesn’t meet the required level of Dutch proficiency.

All girls in high school agree with having to deal with the constant pressure to perform at school and how this affects her mental and physical health. One of the girls states:

*‘‘Ik moet iets bewijzen en het voelt dat ik faal. Dit geeft een gevoel in mijn buik van soort van ziek zijn en dan moet ik soms huilen bij de kleinste foutjes.’’*

*‘‘I must have to prove something and this feels like I am failing. I get this weird feeling in my stomach which feels like being sick and sometimes I cry, even if it is just a small mistake.’’*

Additionally, the pressure to succeed academically while also being the translator for their parents might be a reason to feel physically unwell. One of the girls mentioned:

*“Soms voel ik mij de volwassene. Ik help mijn moeder met alles omdat zij geen Nederlands kan. Ik moet post vertalen, maar sommige brieven zijn ook te moeilijk voor mij. Dan voelt het dat ik faal, omdat ik niet kan vertalen voor mijn ouders. Dit geeft mij stress, en soms misselijkheid of hoofdpijn.”*

*“Sometimes I feel like an adult. I help my mom with everything because she doesn’t understand Dutch properly. I have to translate the mail for her as well, but sometimes those letters are too difficult for me. In that case it feels like I failed, since I am not able to translate properly for my parents. This results into feelings of stress, nauseous and headaches.”*

## **5. Discussion**

### **5.1 Key Findings**

The goal of this study is to investigate the impact of forced migration on children between the ages of 10 to 17 years old. These children were forced to migrate and were replaced in the northern part of the Netherlands. When arriving in the Netherlands, they were accompanied by at least one of their parents. This study solely focuses on children’s own experience. Therefore, this study provides an unique insight in how these children feel.

#### *5.1.1 Emotional well-being*

In the context of emotional well-being, children mostly expressed feelings of happiness and pride. These feelings were often linked to family relations, accomplishments in school, religious practices or hobbies like traveling. Additionally, these feelings were most present when children talked about family visits, travels and religious events, such as participating in Ramadan. The connection within the family setting aligns with Bronfenbrenner’s ecological

system theory (1994), since Bronfenbrenner states that emotional well-being is influenced by multiple interaction systems. In this case an interaction within the micro and macro system.

All participants also mentioned occasions where they did not feel happy. These kinds of feelings mainly occurred within the school setting. While talking about these feelings, children mentioned examples as being bullied. Some children indicated that they shared these experiences with their teachers. However, they often felt a lack of intervention.

Despite these challenges, many children indicated a strong sense of hope for the future. Their aspirations for the future provided them with a clear path which leads to motivation and hope. For many participants the idea of ‘starting fresh’ at school empowering. In addition, these feelings of hope were also related to a strong desire to return to their countries of origin one day. As soon as the war ends, many children report the wish to return to their roots, which reflects emotional ties with their homeland.

#### *5.1.2 Social well-being*

Within all interviews, friendships were highly valued. Younger children, who arrived in the Netherlands at an earlier stage in life, reported more frequently a stronger friendship formed in the school setting. These children arrived in the Netherlands at a younger age. As a result, they learned the Dutch language in the school setting, which made it easier for them to connect with their peers. Therefore most of these friendships occurred within the school settings. In contrast to the older children, who tended to create these social connections through after school activities such as sports, their part-time jobs or online platforms. While some children mentioned the language barriers, cultural differences and bullying as difficulties to forming close relationships, others reported little to no difficulty building connections with their peers.

Secondly, family bonds were described as strong and supportive by all children. Many participants described their families as a safe and loving space. For events such as doing homework with siblings, playing together or even sharing a bedroom were mentioned.

Lastly, community support emerged in the theme of social well-being. This theme was primarily discussed by older participants. They shared meaningful inclusion via churches or mosques and neighbourhood connections. Others felt let down by their communities by talking about moments of being misunderstood or feeling excluded by neighbours. The view of interculturalism (Council of Europe, 2008) is a relevant concept to support this finding, since some children report feelings of exclusion or being bullied, while other children experience inclusion through shared activities.

### *5.1.3 Physical well-being*

Most children reported generally good physical health, with regular checkups with a general practitioner. However, one child in particular faced chronic asthma, which significantly impacted her daily life and resulted in stress related symptoms. Many other children shared stress symptoms such as headaches, nausea and fatigue, which were often linked to academic stress, family pressure of cultural expectations. From Bronfenbrenner's (1994) point of view, the stress might be coming from an interaction between the microsystem (family pressure) and the exosystem (school demands). Notably, these stress symptoms were only reported by girls.

Lastly, many physical activities were mentioned by the participants. Football, kick boxing and fitness were often mentioned when talking about their favourite sports. Due to limited financial resources, it was not possible for every kid to attend after school sport programs. That is mainly the reason why others preferred low-cost alternatives like running outside as a coping strategy for stress relief.

## **5.2 Methodological reflection**

### *5.2.1 strengths of this study*

The use of a child-friendly, interactive memory game can be viewed as one of the strengths of this research. This game was designed in the way that it suits the capacities of the

participants aged 10 to 17 years old. This approach allows children to express their feelings in a comfortable and engaging way, which will increase the authenticity of their response. After the game was finished, many participants shared their desire to continue playing. This indicates that the children were not only comfortable with the method but were also keen to continue sharing their experiences.

Furthermore, this study includes children's voices rather than relying on secondary perspectives. Therefore, this study focused on firsthand narratives from migrant children themselves. By emphasizing the voices of these children, this study tries to strengthen the voices of migrant families, a group that is often overlooked in migration research and political debates, because adult perspectives seem to dominate this debate.

Another important strength of the current research is the concentration on the northern region in the Netherlands. As mentioned in the introduction, current research on this part of the country is limited. Therefore, this study adds important context to a geographic area that is often overlooked in current studies.

### *5.2.2 limitations of this study*

All interviews took place in the family setting. This resulted in all brothers and sisters being present during the game. Some children, mostly the younger children, also request for their parents to stay in the same room. Although brothers and sisters being together can be beneficial for the study, because they can complement each other's answers, it might lead to socially desirable responses. The presence of their brothers and sisters and even parents in some cases might influence children in their willingness to speak openly, especially when negative feelings or sensitive experiences are the main topic.

A second notable limitation of this study is the language barriers some children might have faced during the game. The language barrier might have limited the in depth of the interviews. On occasion, siblings were asked to act as informal translators. While this was

beneficial for the communication, it also posed a new challenge for verifying the given answer. Misinterpretations, feelings of sensitive experiences or emotional nuances might have gone unnoticed.

Finally, within this study, the focus included children who were accompanied by at least one of their parents when arriving in the Netherlands. Additionally, an important inclusion criterion for participants was to be in the country for at least two years. While this inclusion criteria gives a certain level of Dutch understanding and some cultural familiarity with Dutch society, these criteria excluded perspectives of for instance unaccompanied minors and newly arrived migrants.

### *5.2.3 recommendations for follow-up research*

Reflecting back on the game, there was one unexpected unpredictable factor that was not discovered while playing the trail game. Because the structure of the game depends on the memory cards the children flip, there is no particular order in which the questions were asked. In the last interview it happened that the very first memory card turned was about 'home'. This resulted in a conversation about their current neighbourhood, as planned in the interview guideline, but also resulted in a conversation about returning to their country of origin. It seems like this being the first question, overwhelmed the children, since the children shut down and were uncertain how to react. If this study was done again, the game could benefit from including a 'warm-up set' of cards.

Moreover, to stay within the focus of the study, it is important to critically reflect on the topics used in the game. For example, topics as a church or mosque are now added to the category of social well-being. However, these topics might seem a bit off topic to fit in the category social well-being. As well as the newly added categories after the trial. Although it was good to add suggestions brought up by the children their selves, topics like food, money

and traveling are off topic when focussing on the concept of emotional, social and physical well-being.

Another recommendation would be that the age range can be expanded. Many siblings that were too young for this study, showed interest in the game. Therefore, a recommendation for follow-up research would be to develop another game suitable for a younger age range. And, when developing the next game, it is important to take into account which topics the participants themselves would like to talk about. While the custom designed memory game for this study was valuable and gave in depth insight, there is still room to improve the game by involving the children while designing the game. Within this study, the game was designed by the researcher. However, it would be beneficial if the children were the one to design the game. In this case, important topics for them will be present in the game. To extend the game to another level, it can be interesting to include multiple interactions per child over the years. Longitudinal designs can track how the emotional, social and physical well-being of these migrant children can change over time. Additionally, with a longitudinal study, the translation into adolescence can be tracked as well.

### **5.3 Implications**

This study highlighted the need for long term, child-focused and integration policies. As mentioned in the introduction, current policies are mainly focused on a short-term shelter. However, this research shows that migrant children do not stay in the Netherlands for a short term. Although all participants showed a desire to go back to their country of origin one day, some of these participants have been living in the Netherlands for almost ten years. Therefore, this study highlights the need of a shift in these current policies. Current housing policies for instance results in multiple relocations for these children's, which undermines their ability to form friendships, have consistent education and create a feeling of home.

## 6. Conclusion

This study investigates how forced migration impacted the emotional, social and physical well-being of children who were forced to migrate to the northern region of the Netherlands. The main research question that is the focus of this study was: *How does forced migration impact the physical, emotional and social well-being of children resettling in the northern region of the Netherlands?* After completing a participatory and child-centered game for children aged 10 to 17 years old, many experiences in terms of well-being were revealed. The findings show that these children all have their own experience within their new setting. These experiences included feelings of happiness and pride but also moments of exclusion or isolation were reported during the interviews. The findings of this study once again highlight the importance of listening to children's voices.

## 6. References

- Andrade, A. S., Roca, J. S., & Pérez, S. R. (2023). Children's emotional and behavioral response following a migration: a scoping review. *Journal of Migration and Health*, 7, 100176. <https://doi.org/10.1016/j.jmh.2023.100176>
- Bakker, L., Cheung, S. Y., & Phillimore, J. (2016). The Asylum-Integration Paradox: Comparing asylum support systems and refugee integration in the Netherlands and theUK. *International Migration*, 54(4), 118–132. <https://doi.org/10.1111/imig.12251>
- Bastiaansen, D., Koot, H., Bongers, I., Varni, J., & Verhulst, F. (2004). Measuring quality of life in children referred for psychiatric problems: Psychometric properties of the PedsQLTM4.0 generic core scales. *Quality of Life Research*, 13(2), 489–495. <https://doi.org/10.1023/b:qure.00000018483.01526.ab>
- Beeres, D. T., Ravensbergen, S. J., Heidema, A., Cornish, D., Vonk, M., Wijnholds, L. D., Hendriks, J. J. H., Kleinnijenhuis, J., Omansen, T. F., & Stienstra, Y. (2018). Efficacy of ivermectin mass-drug administration to control scabies in asylum seekers in the Netherlands: A retrospective cohort study between January 2014 – March 2016. *PLoS Neglected Tropical Diseases*, 12(5), e0006401. <https://doi.org/10.1371/journal.pntd.0006401>
- Ben-Arieh, A., Casas, F., Frønes, I., & Korbin, J. E. (2013). Multifaceted Concept of Child Well-Being. In *Springer eBooks* (pp. 1–27). [https://doi.org/10.1007/978-90-481-9063-8\\_134](https://doi.org/10.1007/978-90-481-9063-8_134)
- Bernhardt, K., Beherec, S. L., Uppendahl, J. R., Fleischmann, M., Klosinski, M., Rivera, L. M., Samaras, G., Kenney, M., Müller, R., Nehring, I., Mall, V., & Hahnefeld, A. (2024). Young children's development after forced displacement: a systematic review. *Child and Adolescent Psychiatry and Mental Health*, 18(1). <https://doi.org/10.1186/s13034-024-00711-5>

- Bilgili, Ö. (2019). Policy approaches to integration of newly arrived immigrant children in schools. *OECD Education Working Papers*. <https://doi.org/10.1787/f19de900-en>
- Bronfenbrenner, U. (1994). Ecological models of human development. In International Encyclopedia of Education (2nd ed., pp. 37-43). Oxford: Elsevier
- Buchmüller, T., Lembcke, H., Busch, J., Kumsta, R., & Leyendecker, B. (2018). Exploring mental health status and syndrome patterns among young refugee children in Germany. *Frontiers in Psychiatry*, 9. <https://doi.org/10.3389/fpsyt.2018.00212>
- Bullinger, M., Brütt, A. L., Erhart, M., & Ravens-Sieberer, U. (2008). Psychometric properties of the KINDL-R questionnaire: results of the BELLA study. *European Child & Adolescent Psychiatry*, 17(S1), 125–132. <https://doi.org/10.1007/s00787-008-1014-z>
- Bunar, N. (2017). Migration and Education in Sweden: Integration of Migrants in the Swedish School Education and Higher Education Systems, NESET II ad hoc question No. 3/2017.
- Campbell, S., Greenwood, M., Prior, S., Shearer, T., Walkem, K., Young, S., Bywaters, D., & Walker, K. (2020). Purposive sampling: complex or simple? Research case examples. *Journal of Research in Nursing*, 25(8), 652–661. <https://doi.org/10.1177/1744987120927206>
- Cijfers over asielzoekerscentra (azc's) | Nederlands Jeugdinstituut.* (n.d.). <https://www.nji.nl/cijfers/asielzoekerscentra-azc>
- Capio, C. M., Sit, C. H. P., & Abernethy, B. (2014). Physical Well-Being. In *Springer eBooks* (pp. 4805–4807). [https://doi.org/10.1007/978-94-007-0753-5\\_2166](https://doi.org/10.1007/978-94-007-0753-5_2166)
- Connor, P.. (2016, August 2). Numbers of Refugees to Europe Surges to Record 1.3 million in 2015 *Europe's asylum seekers: Origins and numbers*. <https://www.pewresearch.org/global/wp-content/uploads/sites/2/2016/08/Pew-Research-Center-Europe-Asylum-Report-FINAL-August-2-2016.pdf>

Council of Europe. (2008). White Paper on Intercultural Dialogue. “Living Together As Equals in Dignity.”

[https://www.coe.int/t/dg4/intercultural/source/whitepaper\\_final\\_revised\\_en.pdf](https://www.coe.int/t/dg4/intercultural/source/whitepaper_final_revised_en.pdf)

Davis, S. H., Winer, J. P., Gillespie, S. C., & Mulder, L. A. (2021). The Refugee and Immigrant Core Stressors Toolkit (RICST): Understanding the multifaceted needs of refugee and immigrant youth and families through a four core stressors framework.

*Journal of Technology in Behavioral Science*, 6(4), 620–630.

<https://doi.org/10.1007/s41347-021-00218-2>

Due, C., Riggs, D. W., & Augoustinos, M. (2014). Research with Children of Migrant and Refugee Backgrounds: A Review of Child-Centered Research Methods. *Child Indicators Research*, 7(1), 209-227. <https://doi.org/10.1007/s12187-013-9214-6>

European Commision (2017, June). *ECHO Factsheet – June 2017 – Forced displacement* [Press-release]. European Commission – Civil Protection and Humanitarian Aid Operations; European Commission. [https://ec.europa.eu/echo/files/aid/countries/factsheets/thematic/Forced\\_Displacement\\_en.pdf](https://ec.europa.eu/echo/files/aid/countries/factsheets/thematic/Forced_Displacement_en.pdf)

*European Union Directive - 2011/95 - EN - qualification directive - EUR-Lex.* (z.d.).

<http://data.europa.eu/eli/dir/2011/95/oj>

Etikan, I. (2016). Comparison of convenience sampling and purposive sampling. *American Journal of Theoretical and Applied Statistics*, 5(1), 1. <https://doi.org/10.11648/j.ajtas.20160501.11>

Fargas-Malet, M., McSherry, D., Larkin, E., & Robinson, C. (2010). research with children: methodological issues and innovative techniques. *Journal of Early Childhood Research*, 8(2), 175–192. <https://doi.org/10.1177/1476718x09345412>

- Flanagan, S. M., Greenfield, S., Coad, J., & Neilson, S. (2015). An exploration of the data collection methods utilised with children, teenagers and young people (CTYPs). *BMC Research Notes* 8(1), 61. <https://doi.org/10.1186/s13104-015-1018-y>
- Fransen, S., & De Haas, H. (2021). Trends and patterns of global refugee migration. *Population and Development Review*, 48(1), 97–128. <https://doi.org/10.1111/padr.12456>
- Frounfelker, R. L., Miconi, D., Farrar, J., Brooks, M. A., Rousseau, C., & Betancourt, T. S. (2020). Mental health of refugee Children and Youth: Epidemiology, interventions, and future directions. *Annual Review of Public Health*, 41(1), 159–176. <https://doi.org/10.1146/annurev-publhealth-040119-094230>
- Gülşen, C., Knipscheer, J., & Kleber, R. (2010). The impact of forced migration on mental health: A comparative study on posttraumatic stress among internally displaced and externally migrated Kurdish women. *Traumatology an International Journal*, 16(4), 109–116. <https://doi.org/10.1177/1534765610388306>
- Heckmann, Friedrich & Göler, Daniel & Koehler, Claudia & Lippens, Michiel. (2018). SIRIUS-Policy Network on Migrant Education MULTI-COUNTRY PARTNERSHIP TO ENHANCE THE EDUCATION OF REFUGEE AND ASYLUM-SEEKING YOUTH IN EUROPE-PERA Comparative Report.
- Hos, R. (2016). The lives, aspirations, and needs of refugee and immigrant students with interrupted formal education (SIFE) in a secondary newcomer program. *Urban Education*, 55(7), 1021–1044. <https://doi.org/10.1177/0042085916666932>
- Hou, W. K., Liu, H., Liang, L., Ho, J., Kim, H., Seong, E., Bonanno, G. A., Hobfoll, S. E., & Hall, B. J. (2019). Everyday life experiences and mental health among conflict-affected forced migrants: A meta-analysis. *Journal of Affective Disorders*, 264, 50–68. <https://doi.org/10.1016/j.jad.2019.11.165>

- James, A., & Prout, A. (2003). Constructing and reconstructing childhood. In *Routledge eBooks*. <https://doi.org/10.4324/9780203362600>
- Janta, B., Harte, E., & RAND Europe. (2016). Education of migrant children: Education policy responses for the inclusion of migrant children in Europe. In *RAND Europe*. [https://www.rand.org/content/dam/rand/pubs/research\\_reports/rr1600/rr1655/rand\\_rr1655.pdf](https://www.rand.org/content/dam/rand/pubs/research_reports/rr1600/rr1655/rand_rr1655.pdf)
- Kos, S., Maussen, M., & Doornik, J. (2015). Policies of exclusion and Practices of Inclusion: How municipal governments negotiate asylum policies in the Netherlands. *Territory Politics Governance*, 4(3), 354–374. <https://doi.org/10.1080/21622671.2015.1024719>
- Kreichauf, R., & Glorius, B. (2021). Introduction: displacement, asylum and the city – theoretical approaches and empirical findings. *Urban Geography*, 42(7), 869–893. <https://doi.org/10.1080/02723638.2021.1978220>
- Krystallidou, D., Temizöz, Ö., Wang, F., De Looper, M., Di Maria, E., Gattiglia, N., Giani, S., Hieke, G., Morganti, W., Pace, C. S., Schouten, B., & Braun, S. (2023). Communication in refugee and migrant mental healthcare: A systematic rapid review on the needs, barriers and strategies of seekers and providers of mental health services. *Health Policy*, 139, 104949. <https://doi.org/10.1016/j.healthpol.2023.104949>
- Lopez, D. (2013). Data security. *Data Science Journal*, 12(0), GRDI69–GRDI74. <https://doi.org/10.2481/dsj.grdi-012>
- Leeuwestein, H., Kupers, E., Boelhouwer, M., & Van Dijk, M. (2024). Differences in Well-Being at School Between Young Students With and Without a Refugee Background. *Child Psychiatry & Human Development*. <https://doi.org/10.1007/s10578-024-01690-6>

- Marcos, E. B., García, M. F., & Sanguilinda, I. S. (2024). theoretical framework of the integration and well-being of migrant and refugee minors in Europe. *Revista Española De Sociología*, 33(2), a213. <https://doi.org/10.22325/fes/res.2024.213>
- McAuliffe, M., & Mence, V. (2017). Irregular maritime migration as a global phenomenon. In M. MCAULIFFE & K. KOSER (Eds.), *A Long Way to Go: Irregular Migration Patterns, Processes, Drivers and Decision-making* (pp. 11–48). ANU Press. <http://www.jstor.org/stable/j.ctt20krxxh.10>
- Meiqari, L., Hoetjes, M., Baxter, L., & Lenglet, A. (2017). Impact of war on child health in northern Syria: the experience of Médecins Sans Frontières. *European Journal of Pediatrics*, 177(3), 371–380. <https://doi.org/10.1007/s00431-017-3057-y>
- Milton, A. C., Mengesha, Z., Ballesteros, K., McClean, T., Hartog, S., Bray-Rudkin, L., Ngo, C., & Hickie, I. (2023). Supporting Children’s Social Connection and Well-Being in School-Age Care: Mixed Methods Evaluation of the Connect, Promote, and Protect Program. *JMIR Pediatrics and Parenting*, 6, e44928. <https://doi.org/10.2196/44928>
- Palattiyil, G., Sidhva, D., Derr, A. S., & Macgowan, M. (2021). Global trends in forced migration: Policy, practice and research imperatives for social work. *International Social Work*, 65(6), 1111–1129. <https://doi.org/10.1177/00208728211022791>
- Park, C. L., Kubzansky, L. D., Chafouleas, S. M., Davidson, R. J., Keltner, D., Parsafar, P., Conwell, Y., Martin, M. Y., Hanmer, J., & Wang, K. H. (2022). Emotional Well-Being: What it is and why it matters. *Affective Science*, 4(1), 10–20. <https://doi.org/10.1007/s42761-022-00163-0>
- Parker, P. D., Ciarrochi, J., Heaven, P., Marshall, S., Sahdra, B., & Kiuru, N. (2014). Hope, Friends, and Subjective Well-Being: A Social Network Approach to Peer Group Contextual Effects. *Child Development*, 86(2), 642–650. <https://doi.org/10.1111/cdev.12308>

- Pavli, A., & Maltezou, H. (2017). Health problems of newly arrived migrants and refugees in Europe. *Journal of Travel Medicine*, 24(4). <https://doi.org/10.1093/jtm/tax016>
- Ravens-Sieberer, U., Herdman, M., Devine, J., Otto, C., Bullinger, M., Rose, M., & Klasen, F. (2013). The European KIDSCREEN approach to measure quality of life and well-being in children: development, current application, and future advances. *Quality of Life Research*, 23(3), 791–803. <https://doi.org/10.1007/s11136-013-0428-3>
- Ramos, V., & Pereira, N. S. (2018). Material deprivation and food insecurity: perceived effects on mental health and well-being. In *Imprensa de Ciências Sociais eBooks* (pp. 129–152). <https://doi.org/10.31447/ics9789726715054.05>
- Reed, H. E., Ludwig, B., & Braslow, L. (2015). Forced migration. In *International handbooks of population* (pp. 605–625). [https://doi.org/10.1007/978-94-017-7282-2\\_27](https://doi.org/10.1007/978-94-017-7282-2_27)
- Rijkschroeff, R., Dam, G. T., Duyvendak, J. W., De Gruijter, M., & Pels, T. (2005). Educational policies on migrants and minorities in the Netherlands: success or failure? *Journal of Education Policy*, 20(4), 417–435. <https://doi.org/10.1080/02680930500132148>
- Rizkalla, N., Mallat, N. K., Arafa, R., Adi, S., Soudi, L., & Segal, S. P. (2020). “Children Are Not Children Anymore; They Are a Lost Generation”: Adverse Physical and Mental Health Consequences on Syrian Refugee Children. *International Journal of Environmental Research and Public Health*, 17(22), 8378. <https://doi.org/10.3390/ijerph17228378>
- Siebers, H., & Dennissen, M. H. (2014). Is it cultural racism? Discursive exclusion and oppression of migrants in the Netherlands. *Current Sociology*, 63(3), 470–489. <https://doi.org/10.1177/0011392114552504>
- Siriwardhana, C., & Stewart, R. (2012). Forced migration and mental health: prolonged internal displacement, return migration and resilience. *International Health*, 5(1), 19–23. <https://doi.org/10.1093/inthealth/ihs014>

- Spitzer, D. L., & Torres, S. (2023). Migrant family separation, reunification and recalibration. In *Edward Elgar Publishing eBooks* (pp. 286–300).  
<https://doi.org/10.4337/9781789908732.00026>
- UNHCR. (2017). *Global Trends FORCED DISPLACEMENT IN 2017*. Retrieved from  
<https://www.unhcr.org/5b27be547.pdf>
- United nations Convention on the rights of the child Retrieved from (1989)  
<http://www.ohchr.org/EN/ProfessionalInterest/Pages/CRC.aspx>
- Vaghri, Z., Tessier, Z., & Whalen, C. (2019). Refugee and Asylum-Seeking children: Interrupted child development and unfulfilled child rights. *Children*, 6(11), 120.  
<https://doi.org/10.3390/children6110120>
- Varni, J. (1998). Vragenlijst over kwaliteit van leven bij kinderen. In *PedsQL 4.0*.  
<https://www.cappstudie.nl/wp-content/uploads/2019/07/PedsQL-kinderen-8-12-jaar.pdf>
- Van Heelsum, A. (2017). Aspirations and frustrations: experiences of recent refugees in the Netherlands. *Ethnic and Racial Studies*, 40(13), 2137–2150.  
<https://doi.org/10.1080/01419870.2017.1343486>
- Zorlu, A., & Hartog, J. (2001). *Migration and Immigrants: The Case of the Netherlands*.  
<https://www.econstor.eu/handle/10419/85952>

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## Appendix 1: KINDL-R Questionnaire

**Please tell us something about you. Please put a cross or fill in!**

I am a ☐ girl ☐ boy

Age: \_\_\_\_\_ years old

How many siblings do you have? ☐ 0 ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ more than 5

Which type of school do you go to? \_\_\_\_\_



### 1. First of all, we would like to know something about your physical health...

<i>During the past week...</i>	never	seldom	some-times	often	all the time
1. ... I felt ill	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. ... I was in pain	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. ... I was tired and worn-out	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. ... I felt strong and full of energy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### 2. ... then something about how you've been feeling in general...

<i>During the past week...</i>	never	seldom	some-times	often	all the time
1. ... I had fun and laughed a lot	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. ... I was bored	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. ... I felt alone	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. ... I felt scared or unsure of myself	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### 3. ... and how you have been feeling about yourself.

<i>During the past week...</i>	never	seldom	some-times	often	all the time
1. ... I was proud of myself	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. ... I felt on top of the world	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. ... I felt pleased with myself	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. ... I had lots of good ideas	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**4. The next questions are about your family ...**

<i>During the past week...</i>	never	seldom	some- times	often	all the time
1. ... I got on well with my parents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. ... I felt fine at home	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. ... We quarrelled at home	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. ... I felt restricted by my parents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**5. ... and then about friends.**

<i>During the past week...</i>	never	seldom	some- times	often	all the time
1. ... I did things together with my friends	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. ... I was a "success" with my friends	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. ... I got along well with my friends	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. ... I felt different from other people	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**6. Last of all, we would like to know something about school.**

<i>During the last week in which I was at school...</i>	never	seldom	some- times	often	all the time
1. ... doing the schoolwork was easy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. ... I found school interesting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. ... I worried about my future	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. ... I worried about getting bad marks or grades	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Thank you for helping us!**



**Source:** <https://www.kindl.org/english/questionnaires/>

## Appendix 2: KIDSCREEN-10 Questionnaire

### About Your Health

Thinking about the last week...

1. Have you physically felt fit and well?	not at all <input type="radio"/>	slightly <input type="radio"/>	moderately <input type="radio"/>	very <input type="radio"/>	extremely <input type="radio"/>
2. Have you felt full of energy?	never <input type="radio"/>	almost never <input type="radio"/>	sometimes <input type="radio"/>	almost always <input type="radio"/>	always <input type="radio"/>
3. Have you felt sad?	never <input type="radio"/>	almost never <input type="radio"/>	sometimes <input type="radio"/>	almost always <input type="radio"/>	always <input type="radio"/>
4. Have you felt lonely?	never <input type="radio"/>	almost never <input type="radio"/>	sometimes <input type="radio"/>	almost always <input type="radio"/>	always <input type="radio"/>
5. Have you had enough time for yourself?	never <input type="radio"/>	almost never <input type="radio"/>	sometimes <input type="radio"/>	almost always <input type="radio"/>	always <input type="radio"/>
6. Have you been able to do the things that you want to do in your free time?	never <input type="radio"/>	almost never <input type="radio"/>	sometimes <input type="radio"/>	almost always <input type="radio"/>	always <input type="radio"/>
7. Have your parent(s) treated you fairly?	never <input type="radio"/>	almost never <input type="radio"/>	sometimes <input type="radio"/>	almost always <input type="radio"/>	always <input type="radio"/>
8. Have you had fun with your friends?	never <input type="radio"/>	almost never <input type="radio"/>	sometimes <input type="radio"/>	almost always <input type="radio"/>	always <input type="radio"/>
9. Have you got on well at school?	not at all <input type="radio"/>	slightly <input type="radio"/>	moderately <input type="radio"/>	very <input type="radio"/>	extremely <input type="radio"/>
10. Have you been able to pay attention?	never <input type="radio"/>	almost never <input type="radio"/>	sometimes <input type="radio"/>	almost always <input type="radio"/>	always <input type="radio"/>

In general, how would you say your health is?

- ☐ excellent
- ☐ very good
- ☐ good
- ☐ fair
- ☐ poor

Source: kidscreen.org. <https://www.kidscreen.org/contacts/english-usa/>

### Appendix 3: PedsQL-2 Questionnaire

PedsQL 2

Hoe erg heb je in de **AFGELOPEN MAAND** een **probleem** gehad met ...

<b>OVER MIJN GEZONDHEID EN ACTIVITEITEN (problemen met ...)</b>	<b>Nooit</b>	<b>Bijna nooit</b>	<b>Soms</b>	<b>Vaak</b>	<b>Bijna altijd</b>
1. Het is voor mij moeilijk om meer dan 100 meter te lopen	0	1	2	3	4
2. Het is voor mij moeilijk om te rennen	0	1	2	3	4
3. Het is voor mij moeilijk om te sporten of lichamelijke oefeningen te doen	0	1	2	3	4
4. Het is voor mij moeilijk om iets zwaars op te tillen	0	1	2	3	4
5. Het is voor mij moeilijk om zonder hulp in bad te gaan of te douchen	0	1	2	3	4
6. Het is voor mij moeilijk om karweitjes in en om het huis te doen	0	1	2	3	4
7. Ik heb pijn	0	1	2	3	4
8. Ik heb weinig energie	0	1	2	3	4

<b>OVER MIJN GEVOELENS (problemen met ...)</b>	<b>Nooit</b>	<b>Bijna nooit</b>	<b>Soms</b>	<b>Vaak</b>	<b>Bijna altijd</b>
1. Ik voel me angstig of bang	0	1	2	3	4
2. Ik voel me verdrietig	0	1	2	3	4
3. Ik voel me boos	0	1	2	3	4
4. Ik heb moeite met slapen	0	1	2	3	4
5. Ik maak me zorgen over wat mij zal overkomen	0	1	2	3	4

<b>HOE IK MET ANDEREN OP KAN SCHIETEN (problemen met ...)</b>	<b>Nooit</b>	<b>Bijna nooit</b>	<b>Soms</b>	<b>Vaak</b>	<b>Bijna altijd</b>
1. Ik heb moeite om met andere kinderen om te gaan	0	1	2	3	4
2. Andere kinderen willen mijn vriend(in) niet zijn	0	1	2	3	4
3. Andere kinderen pesten mij	0	1	2	3	4
4. Ik kan dingen niet die andere kinderen van mijn leeftijd wel kunnen	0	1	2	3	4
5. Het is moeilijk om met andere kinderen mee te kunnen blijven doen als ik met ze speel	0	1	2	3	4

<b>OVER SCHOOL (problemen met ...)</b>	<b>Nooit</b>	<b>Bijna nooit</b>	<b>Soms</b>	<b>Vaak</b>	<b>Bijna altijd</b>
1. Het is moeilijk om op te letten tijdens de les	0	1	2	3	4
2. Ik vergeet dingen	0	1	2	3	4
3. Ik heb moeite om bij te blijven met mijn schoolwerk (waaronder huiswerk)	0	1	2	3	4
4. Ik ga niet naar school, omdat ik me niet lekker voel	0	1	2	3	4
5. Ik ga niet naar school, omdat ik naar de dokter of het ziekenhuis moet	0	1	2	3	4

Hoe erg heb je in de **AFGELOPEN MAAND** een **probleem** gehad met ...

OVER MIJN GEZONDHEID EN ACTIVITEITEN ( <i>problemen met ...</i> )	Nooit	Bijna nooit	Soms	Vaak	Bijna altijd
1. Het is voor mij moeilijk om meer dan 100 meter te lopen	0	1	2	3	4
2. Het is voor mij moeilijk om te rennen	0	1	2	3	4
3. Het is voor mij moeilijk om te sporten of lichamelijke oefeningen te doen	0	1	2	3	4
4. Het is voor mij moeilijk om iets zwaars op te tillen	0	1	2	3	4
5. Het is voor mij moeilijk om zonder hulp in bad te gaan of te douchen	0	1	2	3	4
6. Het is voor mij moeilijk om karweitjes in en om het huis te doen	0	1	2	3	4
7. Ik heb pijn	0	1	2	3	4
8. Ik heb weinig energie	0	1	2	3	4

OVER MIJN GEVOELEN ( <i>problemen met ...</i> )	Nooit	Bijna nooit	Soms	Vaak	Bijna altijd
1. Ik voel me angstig of bang	0	1	2	3	4
2. Ik voel me verdrietig	0	1	2	3	4
3. Ik voel me boos	0	1	2	3	4
4. Ik heb moeite met slapen	0	1	2	3	4
5. Ik maak me zorgen over wat mij zal overkomen	0	1	2	3	4

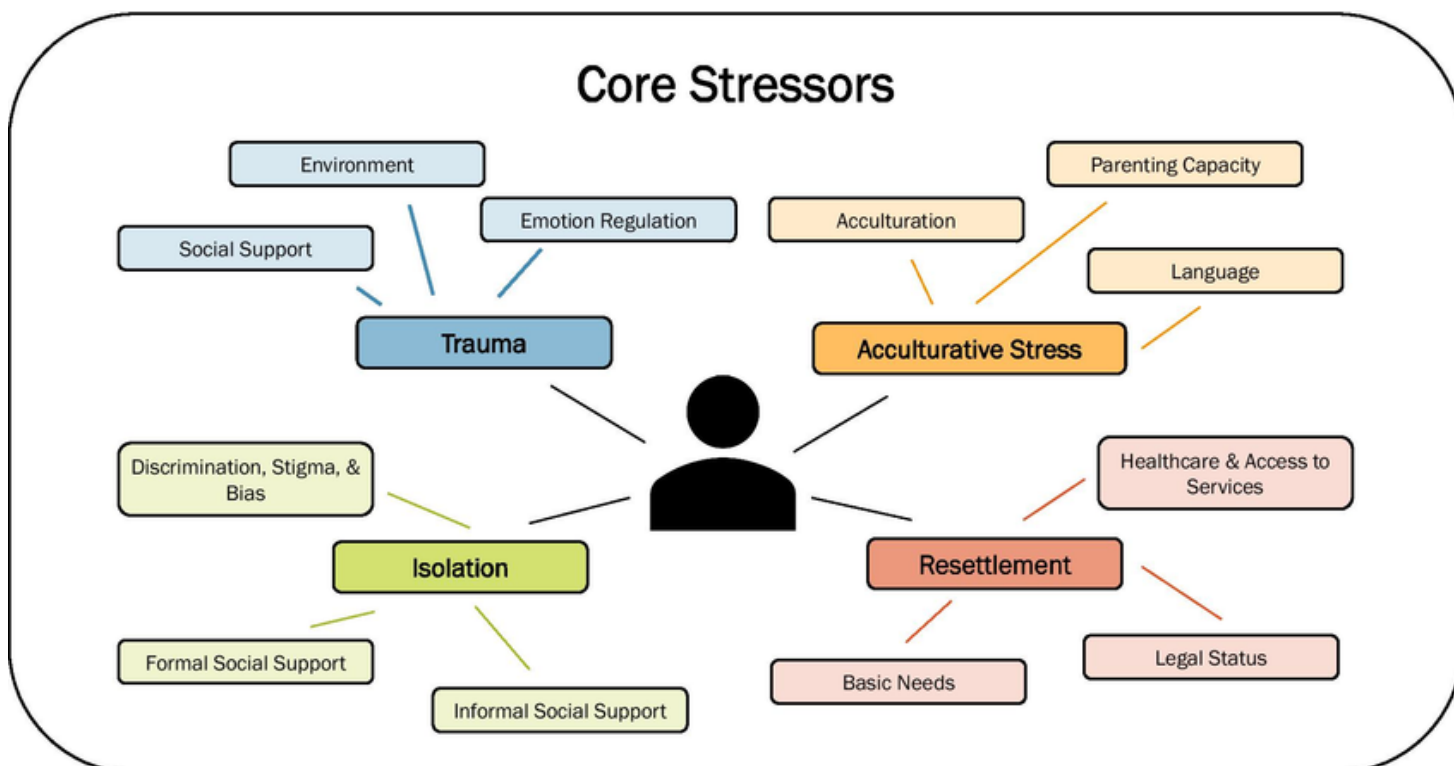
HOE IK MET ANDEREN OP KAN SCHIETEN ( <i>problemen met ...</i> )	Nooit	Bijna nooit	Soms	Vaak	Bijna altijd
1. Ik heb moeite om met andere kinderen om te gaan	0	1	2	3	4
2. Andere kinderen willen mijn vriend(in) niet zijn	0	1	2	3	4
3. Andere kinderen pesten mij	0	1	2	3	4
4. Ik kan dingen niet die andere kinderen van mijn leeftijd wel kunnen	0	1	2	3	4
5. Het is moeilijk om met andere kinderen mee te kunnen blijven doen als ik met ze speel	0	1	2	3	4




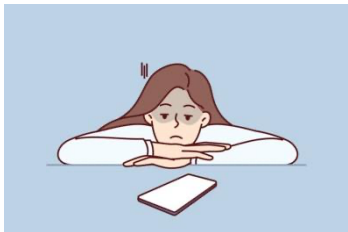


OVER SCHOOL ( <i>problemen met ...</i> )	Nooit	Bijna nooit	Soms	Vaak	Bijna altijd
1. Het is moeilijk om op te letten tijdens de les	0	1	2	3	4
2. Ik vergeet dingen	0	1	2	3	4
3. Ik heb moeite om bij te blijven met mijn schoolwerk (waaronder huiswerk)	0	1	2	3	4
4. Ik ga niet naar school, omdat ik me niet lekker voel	0	1	2	3	4
5. Ik ga niet naar school, omdat ik naar de dokter of het ziekenhuis moet	0	1	2	3	4

Source: Varni (1998)

## Appendix 4: Refugee Services Core Stressor Assessment Tool



## Appendix 5: The final game

Picture	Question	Inspired by
<b>Emotional well-being:</b>		
	What makes you happy? What do you feel when you happy?	KINDL-R Q <sup>1</sup> :2.1 KINDL-R Q: 3.2
	What makes you sad? What do you do when you feel sad?	KIDSCREEN-10 Q:3 PedsQL-2 Q:2.2
	When was a moment that you were proud of yourself?	KINDL-R Q: 3.1 – 3.3
	Do you ever feel bored? What can you do when you feel bored? Have you felt lonely? What do you do when you feel lonely?	KINDL-R Q: 2.2 KIDSCREEN-10 Q: 4
<b>Social well-being:</b>		
	What do you like to do with your friends? How often do you see your friends? Where did you meet your friends?	KINDL-R Q: 5.1 – 5.3 KIDSCREEN-10 Q: 8
	Do you get along well with your parents/siblings? Why? What do you like to do with your family?	KINDL-R Q: 4.1 – 4.4

<sup>1</sup> Question



How does your ideal weekend look like?  
What do you do on the weekends?

KIDSCREEN-10 Q: 6



What is a skill you're really good at?  
What is a skill you would like to improve?

KINDL-R Q: 3.1 – 3.4



Which languages do you speak?  
Which language would you like to improve?

Refugee Services Core Stressor Assessment tool: language



Are you religious? What kind of religion?  
What does religion mean to you?  
How often do you go to church / the mosque?

Stressors Assessment tool: Resettlement



Do you go to school? In which year are you?  
What do you like about school?  
What do you dislike about school?  
How are the teachers?  
How do you feel about your schoolwork?

KINDL-R Q: 6.1 – 6.4  
KIDSCREEN Q: 9 and 10



Do you feel fine at home?  
Why?  
What do you like about  
your neighborhood?  
What would you like to  
improve about your  
neighborhood?  
How do you feel about your  
home country? And what  
are the difference with the  
Netherlands? Would you  
like to return one day?

KINDL-R Q: 4.2  
Refuges Service Core  
Stressors Assessment tool:  
Resettlement – Basic Needs  
Acculturative stress -  
Acculturation



What is your favorite  
holiday?

Refuges Service Core  
Stressors Assessment tool:  
Resettlement



What would you like to be  
when your grown up?  
What kind of education do  
you need for that job?

KINDL-R Q: 6.3



What do you like about the  
Netherlands?  
What do you dislike about  
the Netherlands?

Refuges Service Core  
Stressors Assessment tool:  
Resettlement

**Physical well-being:**



Do you have your own bedroom?  
What do you like about your room?  
What would you improve about your room?

KINDL-R Q: 4.2  
KIDSCREEN Q: 5



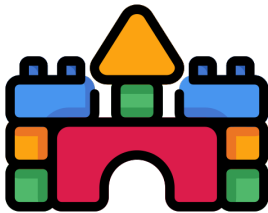
Have you ever been to the doctor in the Netherlands?  
And in your homecountry?  
If yes, would you like to share why?

Stressors Assessment tool:  
Resettlement – Healthcare & access to services.  
KIDSCREEN-10 Q: 1  
KINDL-R Q: 1.1 – 1.4



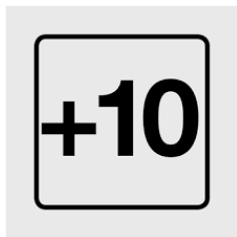
What kind of sport do you play?  
Do you enjoy being active?  
With who are you playing sports?

KINDL-R Q: 1.4  
KIDSCREEN Q: 1 and 2  
PedsQL-2 Q: over mijn gezondheid en activiteiten



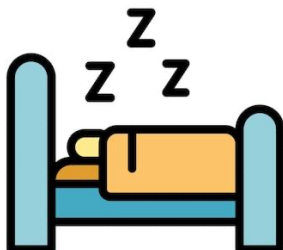
What do you like to do in your spare time?  
What is your favorite object to play with?

KIDSCREEN-10 Q: 6



If you have to grade your overall well-being (1 = really bad, 10 = really great) what would it be?

KIDSCREEN-10: Q in General, how would you say that your health is?



What time do you wake up?  
What time do you go to sleep?  
Did you ever feel tired or worn-out?

KINDL-R Q: 1.3

**General knowledge:**

When is your birthday?  
How old are you?

General knowledge of age



**‘Fun’ category**



What kind of food do you like?  
How often do you eat these kind of foods?  
What kind of food do you bring to school?

Added after the trial



Do you have a part time job? Which job? (older kids)  
What would you like to buy if you had a lot of money?  
Why?

Added after the trial



Do you have a mobile phone?  
Where do you use it for?

Added after the trial



Have you ever been on  
holiday? To where?  
Or would you like to  
travel? Why and where?

Added after the trial

## Appendix 6: Coding process

Main theme	Sub theme	Code
Emotional well-being	Emotional expression <sup>2</sup>	Happiness
		Pride
		Joy
		Sadness
		Exclusion
		Hope
		Scared
		Bored
		Confidence
		Safety
Social well-being	Safety	Safety in the Netherlands
		Safety in the Community
	Family	Parents
		Siblings
		Other relatives
	Friends	Family country of origin
		Friends at school
		Friends other places
	Community	Church
		Mosque
		Work
	School	After school activities
		Peers
		Teachers
	Religion	Bullying
		Prayer
		Values
	Future Home countries	Ramadan
		Jobs
		War
Physical well-being	Health	Mother tongue
		Illnesses
		Doctor visits
		Hospital
		Broken bones
	Sports	Headache
		Fitness
		Football
		Kickboxing
		Swimming
	Sleep	Hours of sleep
		Shared bedroom
	Neighbourhood	Playgrounds
		Outside activities
	Stress	Educational

<sup>2</sup> The emotional expressions are an interpretation of the researcher unless the child explicitly stated they felt a certain kind of emotion.

		Pressure
<b>Observations</b>	Prejudges	Neighbour