



Assessing the Efficacy of Medical and Cultural Support for Immigrant Adaptation and Social Integration

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Abstract

Background: The research was designed to investigate the perceptions and attitudes of immigrants towards extra medical support programs that Immigrant Support Centers (ISC) offer. We aimed to find how they evaluate such medical support in terms of helpfulness for social integration in the host country.

Methods: The study was performed in South Korea during May-June 2023. A questionnaire was prepared in six languages, with 132 participants. The survey categorized the respondents into three groups, group (A) that received only medical support, group (B) that received only cultural support, and group (C) that received both. The statistical program SPSS windows 22.0 was used for the analysis, and finding the most effective way of medical and cultural support programs was verified through inter-group analysis.

Results: The analysis of the results shows that the immigrants find the biggest hardship in the new country when a health problem occurs. The most significant barriers were language differences and cultural differences. The immigrants' participation in the extra medical support programs can address those barriers. However, time, age, and length of stay were significant factors, and most of the participants found the extra cultural support more effective at the earlier stage of their stay in Korea.

Discussion: The study suggests that it is important to provide both medical and cultural support in the early stage of the immigrants staying in another country. Indeed, this might be a way to use medical support to induce them to further adaptation. Besides, providing culturally oriented medical support is likely to foster social integration through medical support.

Keywords: Immigrant; South Korea; Medical support programs; Cultural support programs

Introduction

Immigration has consequences in different aspects of life, and accessing healthcare services is not an exception. According to the WHO, universal health coverage (UHC) is essential for all people which means to have access to the full

range of quality health services they need. Unfortunately, it seems that immigrants have been facing barriers to accessing health care, as reported in several studies (1-3). Such barriers, mostly in the initial stage of cultural shock might hinder



social integration and affect the quality of accessing appropriate health services, and doctor-patients interaction.

Cultural factors have always played a critical role in designing behavior in the healthcare domain (4, 5). For instance, 'medical tourism' as a subsector has been defined as 'relatively short distance, cross borders' and 'diasporic' (5, 6), which implies the efficiency of 'cultural factors' in healthcare. Cultural competence in healthcare has always been significant as a potential strategy to improve not only the quality but also to eliminate ethnic disparities (7). Likewise, immigration might lead to negative impacts in terms of accessing culturally qualified healthcare, specifically in the early phase of the migration. It is difficult for immigrants to understand accurately both medical information and medical systems due to difficulties in verbal communication and cultural differences. Immigrants seem to prefer medical support with communication convenience, and thereafter, affinity, reliability, and psychological stability. Previous studies, also, suggest that medical accessibility is highly correlated with cultural support (8-10). Unlike medical tourists who have the choice to select their destination in accordance with their cultural backgrounds and other factors (5, 6, 11-14) such an option is not available for immigrants. Therefore, it seems that the immigrants support would be efficient by providing a 'culturally-congruent' service to them. Such extra support will take care of 'non-clinical factors' that are formed based on the individual 'needs' of immigrants. It will lead to an effective interaction between immigrant patients and doctors, besides studies highlighted the positive consequences, including trust (5), satisfaction (15), and increased healthcare quality (16, 17).

South Korea (Korea) as a homogeneous country have not interact with foreigners very much (18). The number of immigrants in South Korea, however, is continuing to increase. As of the end of March 2023, the number of foreigners living in Korea was about 2.34 million, an increase of 18.8% from the previous year. However, a Human Rights Consciousness Survey in 2022 highlighted the discriminatory attitude toward immi-

grants in the society (19). In Korean society, which is suffering from aging and low birth rates, immigrants are essential for stabilizing the labor market and demographic structure; otherwise, the country could disappear from the map based on the predictions (20). In both the need to invite the immigrant population and the pursuit of human rights, it is an important task for the nation to create an environment in which immigrants can adapt well and effectively to Korean life. While recognizing immigrants as members of Korean society, the fact that discrimination, and human rights violations against them remain is a factor that hinders social integration (21-23).

On this principle, it has now become important to find an effective way of social integration. Medical and cultural support programs – the focus of the current study – are likely the most efficient ways. The Korea Institute for Health and Social Affairs' survey showed that among job, housing, education, health/medical, and child-rearing policies, the policies that immigrants felt most needed and most helpful were health/medical policies. Likewise, the social integration indicators developed by the Institute for Immigration Policy include seven areas and among them, health welfare was identified as the most important. Despite the various medical systems and support immigrants find difficulty in accessing them making it still hard to adapt to social integration (24). Cultural supports for accelerating social integration for immigrants include teaching the language of the host country and providing several activities to engage immigrants to cultural events (25). If a positive synergy between medical support programs and cultural support programs is expected, it may encourage participation when both programs are offered. Improvement in medical service provision should be approached from the perspective of integrating the immigrants into Korean society, improvement of public health, and establishment of health rights, according to the Ministry of Health. Although medical support and cultural support seem to be correlated and are expected to have a positive effect on social adaptation, this approach has yet to be approved in previous studies. Sepa-

rate studies have been conducted on immigrants' adaptation in Korea through either medical support or cultural support. For example, cultural leisure activities of married immigrant women help them adapt to society (26), and another study examined the impact of religious discrimination on the life satisfaction of immigrants (27), but there is no study on the role of medical support in relation with cultural support. Meanwhile, the National Human Rights Commission (2020) studied the health rights of immigrants and ways to improve the medical security system, besides the obstacles of Indonesian students in terms of accessing medical services studied in Korea (28). Hence, it seems that the migrant health policies have been well-established and studied (30), but there is no focus on cultural support. In addition, the existing studies on immigrants mainly conducted interviews with authorities (24), or studied only one migrant community (25, 30, 31). This is because it is difficult to survey directly immigrants due to the language barrier and their privacy. There is also a problem that undocumented immigrants tend to avoid participating. Existing studies have approached the situation indirectly and evaluated the medical or cultural supports for immigrants.

We aimed to investigate whether extra medical and cultural support programs could mediate access to healthcare services more easily and with better quality, and eventually ease the process of social integration for immigrants.

Methods

With the cooperation of the Immigrant Support Center located in Gyeonggi-do, South Korea, a survey was conducted between May to June 2023. A total of 132 people participated in the survey. The survey was on the day when both extra medical support programs (free health check-ups) and cultural support programs (Korean culture courses) were in service. 'Medical support (programs)' and 'cultural support (programs)' are used in the study representing two main support programs to help immigrants in fostering social integration.

'Medical support programs' indicate programs such as free health check-ups, consultation on health problems, accompaniment of a patient to medical institutions, designing financial support, etc. While 'Cultural support programs' indicate education programs (in language, computer, Korean culture, etc.), excursions, home-country community activities, etc.

A questionnaire consisting of questions about social integration and adaptation to the host country was prepared in six languages (Korean, English, Cambodian, Thai, Vietnamese, and Myanmar language). In total 132 Immigrants who agreed with the purpose of the study voluntarily participated.

This research conformed to the ethics requirements and acquired institutional ethics approval. The participants were informed of the purpose of the study as well as how the interview data were stored and analyzed.

The statistical program SPSS Windows 22.0 (IBM Corp., Armonk, NY, USA) was used for the analysis – and finding the most effectiveness of medical and cultural support programs, which is the interest of this study, was verified through inter-group analysis.

Results

The descriptive analysis indicates that men accounted for 82.3% and women accounted for 17.7% (23). The average age was 31.94 years old, with 44.3% in their 20s, and 43.5% in their 30s. There were 11 countries of origin, with Cambodia (31.8%) and Nepal (23.5%) being more than half. The biggest reason for their stay in Korea was economic reasons (89.3%). The length of stay for more than half of the respondents was less than two years.

The difficulties immigrants face while living in Korea were language problems (27%), loneliness (14.3%), social integration and work (11.0%), cultural differences (9.7%), low wages, and hard labor (8.0%). Asking deeper questions, we found that difficulty in social integration arose mainly because of communication problems and unfam-

miliarity with Korean culture, and these difficulties led to loneliness. In addition, these factors hindered “using medical service.”

The result indicates that despite the governmental support for immigrant insurance, there are still difficulties in accessing medical care. To be more specific, even though 69% of immigrants-respondents initially mentioned that there is not much problem in visiting the health institutions, extra detailed questions clarified communication barriers, as presented in Table 1. The result im-

plies that ‘communication’ is the biggest barrier to visiting medical institutions directly. It could be conjectured that some immigrants first visited Immigrant Support Centers when health problems occurred, and then went to medical institutions with the accompaniment of a helper from the center. When health problem occurs, immigrants first visit support centers to gather understandable information and find someone reliable to ask for help.

Table 1: Reason for visiting immigrant center when ill and reason why it is difficult to visit medical institutions

<i>Variable</i>	<i>Number</i>	<i>Rate (%)</i>	
Reason for visiting immigrant center when ill	Because they can communicate with me.	44	36.7
	Because they accompany me to the hospitals.	31	25.8
	Because they help with expenses	13	10.8
	Because they are friendly	11	9.2
	Because they are trustworthy	18	15.0
	Other	3	2.5
Total	120	100.0	
Reason why it is difficult to visit medical institutions	Communication is difficult	65	46.1
	The process is complicated	6	4.3
	It is expensive	26	18.4
	It is too far (not nearby)	15	10.6
	Fear of immigration issues	3	2.1
	Fear of losing income	6	4.3
	lack of information	18	12.8
	other	2	1.4
Total	141	100.0	

The results suggest that the Immigrant Support Center’s cultural/educational programs seems to have a positive impact on immigrants’ use of medical institutions and ease of accessing appropriate health services. Furthermore, successful experiences in medical institutions through the help of Immigrant Support Centers positively

affect adaptation to Korean life. For further investigation, the survey categorized the respondents into three groups, group (A) that received only medical support provided by Immigrant Support Centers, group (B) that received only cultural support, and group (C) that received both medical and cultural support (Table 2).

Table 2: Types and frequency of immigrant support participation

<i>Variable</i>	<i>Number</i>	<i>Rate (%)</i>
A Group: only Medical Support	20	18.2
B Group: only Cultural Support	68	61.8
C Group: Both Medical and Cultural Support	22	20.0
Total	110	100.0

There were 132 people in total, but those who participated in any of the Immigrant Support Center’s support programs were 112. This is understood to reflect the results of 14.3% of immigrants who have a short period of stay in Korea, especially those who have stayed less than a year, in other words, some people came to the Immigrant Support Center for the first time on the day of the survey. Group (A) was 17.9% (20 people), Group (B) was 62.5% (70 people), and Group (C) was 19.6% (22 people). Because more immigrants were at their early stage of immigration, the participation rate in cultural support was higher, thus, Welch test were applied to normalize the number of participants in each group.

Among the three groups, differences were found in age and length of stay in Korea. The average age of Group (A) was 35.11, the oldest, and they stayed for the longest period in Korea, which was 4.89 years. Group (B) had an average age of 31.20 years and a residence period of 4.45 years, Group (C) had an average age of 30.27 years and a residence period of 4.05 years. The youngest group tended to have participated in both medical and cultural support programs.

The degree of satisfaction in terms of social integration indicates the degree to which participants have satisfactorily adapted to the lifestyle of their host country (social integration). It was measured in 5-point scale (Table 3).

Table 3: Satisfaction of Social Integration among Migrant Groups, A, B, C

<i>Dependent variable</i>	<i>Groups</i>	<i>Cases</i>	<i>Mean</i>	<i>Standard Deviation</i>	<i>F(Sig.)</i>
Adaptation	A Group	20	4.00	.65	.098
	B Group	68	4.22	.59	
	C Group	22	3.86	1.04	
	Total	110	4.11	.72	

The difference between groups was not statistically significant. This seems to be related to the fact that the overall average score of social integration satisfaction was high at 4.11 points (out of 5). Although not statistically significant, satisfaction was the highest in Group (B), which participated only in cultural support programs, and it was followed by the satisfaction rate for medical support programs, and then Group (C), which

participated in both types of support programs. However, the rates for the three groups were similar and not statistically different. Considering that Group (C) is the youngest and has a shorter period of stay in Korea, it can be assumed that they were not yet familiar with the Korean language and culture, making it difficult for them to rate their social integration high.

Table 4: Immigrant Support Center Program Helpfulness Inter-Group Test Results

<i>Dependent variable</i>	<i>Groups</i>	<i>Cases</i>	<i>Mean</i>	<i>Standard Deviation</i>	<i>F(Sig.)</i>
Helpfulness of Cultural Program	A Group	20	3.15	1.60	3.244*
	B Group	68	3.64	1.39	
	C Group	22	4.18	.59	
	Total	110	3.66	1.34	
Helpfulness of Medical Support	A Group	20	3.30	1.53	1.596
	B Group	68	3.64	1.47	
	C Group	22	4.04	.65	
	Total	110	3.66	1.36	

**P* < .05,

Table 4 presents the results of the inter-group test on the helpfulness of cultural programs and medical support across three distinct groups (A, B, and C). It shows how the respondents rated the helpfulness of the programs provided by the Immigrant Support Center. The difference among groups assessing the cultural support programs was statistically significant ($P < 3.244$). However, the difference in assessing the medical support programs was not significant. The degree to which both programs fostered social integration was 3.66 out of 5 (out of 5), slightly higher than the average.

For the "helpfulness of cultural program" Group C exhibited the highest mean score (4.18), indicating perceived effectiveness in cultural programs and a robust positive perception within this demographic, followed by Group B (3.64), and Group A (3.15). The standard deviation for Group C was notably lower (0.59), implying greater consensus among respondents in this group. The overall F-test yielded a statistically significant result ($F(3.244)^*$, $P < 0.05$), indicating variability among the groups. This suggests that the observed differences in mean scores for cultural programs are unlikely to be due to chance, highlighting the importance of considering group dynamics in the design and implementation of such programs. Concerning the "helpfulness of medical support" Group C again reported the highest mean score (4.04), reflecting a perceived

efficacy in medical support, followed by Group B (3.64) and Group A (3.30). Similar to the cultural program, Group C displayed a lower standard deviation (0.65), suggesting a more uniform perception within the group. The F-test result ($F(1.596)$, $P > 0.05$) indicates that the observed differences in means for medical support are not statistically significant.

Further, Fig. 1 depicts the results of the previous sections. It indicates that the perceived helpfulness of both cultural programs and medical support varies across different immigrant groups. Group C consistently reported higher mean scores for both cultural programs and medical support, suggesting a positive perception of these services within this demographic, however, this group of participants had the lowest rate of social integration among 3 groups. Having a comparative viewpoint, group (A) represents a considerably low rate of helpfulness for both cultural and medical support. Group (C) as the youngest group and shortest period of residency had the lowest satisfaction rate of social integration but rated immigrant support programs the highest. On the other hand, groups (A) and (B), showed a high level of satisfaction regarding their social integration, but rated support programs to be relatively less helpful (in comparison to group C). Between the two groups, Group (A) rated all categories lower than Group (B).

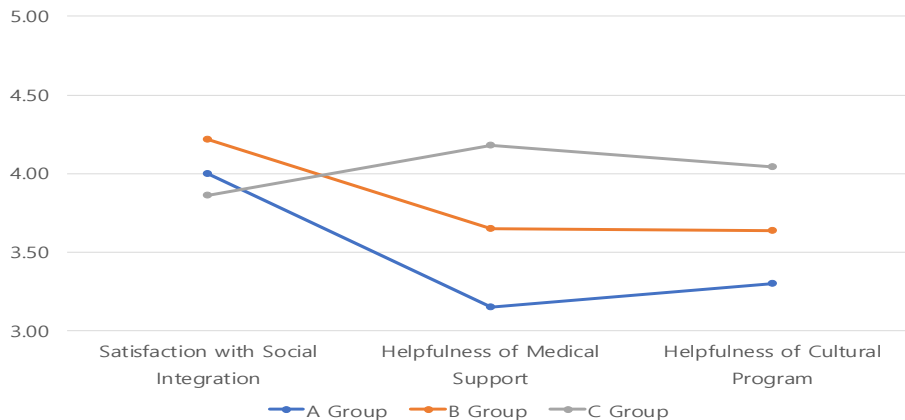


Fig. 1: Inter-group Comparison between Satisfaction and Adaptation

Discussion

The study aimed to determine the role of extra medical and cultural supports in the process of social integration for immigrants. In this context, the importance of accessing medical and cultural support was examined for the immigrants in South Korea. The results contribute to insights into the role of culture-oriented supports for accessing medical treatment, and how it is likely to be efficient in the process of social integration, specifically for immigrants.

The results indicate that language, besides cultural differences plays a role as a barrier to accessing quality healthcare services. The social isolation that most of the immigrants face at the early stage of their immigration leads to several negative consequences. The result indicate that it hinders accessing 'quality care', which is consistent with the previous research (1-3). Indeed, the lack of information about the healthcare system of the host country affect the process of treatment. Hence, facilitating a system to provide support for immigrants in their healthcare needs will provide not only a quality healthcare service but also foster their social integration.

We also support the efficient impact of demographic factors, including age and the length of stay in the host country as an immigrant. The perceived helpfulness of cultural and medical supports is likely to differ for immigrants based on their demographic factors. The result indicates that if the older age/longer stay means a lower language/cultural barrier, and if that leads to a lower rating to the support programs, then we should be able to draw out two conclusions. The older age/longer stay group still needed medical support and participated in them, but the support was less helpful to them in terms of social integration. However, in the early stage of immigration, immigrants perceive participating in both cultural and medical programs as more effective. During the early stages of social integration, immigrants may encounter challenges related to adapting to a new cultural environment. The pos-

itive association between perceived helpfulness and cultural programs in Group C suggests that targeted cultural support during this phase can significantly contribute to a positive experience for immigrants.

Therefore, it seems that providing a culturally congruent service (6, 11), especially at the early stage of immigration - will address not only the barriers to accessing an appropriate health service for immigrants but also is instrumental in fostering a sense of belonging and well-being.

Conclusion

The study highlights the significance of recognizing and addressing the nuanced perceptions of cultural programs and medical support among different immigrant groups. Providing cultural support is essential for immigrants, along with medical support. Especially during their early stage of social integration, it would be efficient to recognize the multifaceted needs of immigrants beyond just medical assistance. Medical support is more directly related to the immigrants' lives it is effective to use medical support to induce them to further social integration through cultural support. Customized interventions that consider the specific needs and preferences of each group have the potential to enhance the overall effectiveness of support services, ultimately contributing to the well-being of the immigrant population.

Journalism Ethical considerations

Ethical issues (Including plagiarism, informed consent, misconduct, data fabrication and/or falsification, double publication and/or submission, redundancy, etc.) have been completely observed by the authors.

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Conflict of Interest

The authors declare that there is no conflict of interests.

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