



PRIMARY RESEARCH

Exploration of mental health issues among refugees in the Netherlands

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Keywords

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Abstract

It is difficult to control immigration on a political, economic, and social level. To address this difficulty, it may be helpful to clarify the social psychological antecedents that give rise to the emergence of unfavorable sentiments against immigrants. The current study examines the connections between social isolation, social interaction, and mental health issues. It also looks at the moderating effects of loneliness and the mediating effect of interpersonal interest. Using a survey approach and a basic random sampling strategy, data from 220 refugees residing in the Netherlands was gathered across the social identity theory. The methodology used was cross-sectional utilized for gathering data. With moderation, social isolation and social relationships can be balanced. The study looked into connections between individuals, contacts, and mental health problems. SmartPLS 3.0 was utilized for the purpose of carrying out analyses involving mediation. Interpersonal interest serves as a mediator and affects loneliness as a variable that moderates. Smart PLS analysis effectively collaborates with a small set of data points, and complex structural equation modeling was utilized to investigate the information. The study assessed the occurrences of social exclusion and the frequency of social interactions. Levels of connection with others, feelings of isolation, and issues related to psychological well-being among the individuals. Refugees work through feelings of isolation and enhance their networks of social support. These results emphasize the importance of considering social factors in interventions designed to enhance mental health among this group and gain more insight into the complex nature of the relationship between social dynamics and mental health challenges in refugee populations.

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INTRODUCTON

Although most refugees around the world look for security in their native lands, European countries have experienced a significant rise in asylum seekers in recent years, hitting peak levels in the 1990s and more recently (Younes, Ghorashi, & Ponzoni, 2021). Worries about how refugees are perceived in countries offering asylum have grown due to this surge. Several controversial policy initiatives have been introduced with the goal of distributing the responsibility for migrants and asylum seekers across Europe through relocation plans or quotas. Comparable rules have been implemented on a federal, municipal, and community scale to alleviate pressure on housing markets and prevent the formation of "concentration zones" (de Hoon, Vink, & Schmeets, 2021). These strategies are often based on the

assumption that refugees will remain in dispersed areas and benefit from the opportunities for "integration" available there. The assumptions have been addressed in the literature (Van Liempt & Staring, 2023). The main challenges encountered during the two-year asylum-seeking process in the Netherlands are fatigue, cramped living conditions, concerns about family in Syria, traumatic experiences, uncertainty about the future, and the inability to work or pursue education until official refugee status is obtained (Younes et al., 2021).

Despite being a critical component of human welfare, mental health is frequently disregarded and vilified. The World Health Organization reports that the annual increase in the prevalence of mental health issues is 13%. (Foulkes & Andrews, 2023). The two most prevalent mental health con-

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ditions, anxiety, and depression, influence 264 million and 280 million individuals globally, respectively (Beyari, 2023; Xu, Li, Mao, & Chi, 2023). Furthermore, by the end of 2018, it was anticipated that 269 million people were battling drug and substance abuse (Cooper et al., 2021). For a number of reasons, these figures are probably going to keep rising. In the past ten years, there have been significant initiatives in the Western world to raise public awareness of mental health issues (here defined as mental diseases and associated subclinical symptoms). Anxiety, depression, eating disorders, and self-harm have all been reported to have grown in prevalence throughout that time (Foulkes & Andrews, 2023; He, He, Zhou, Nie, & He, 2020; Hutten, Jongen, Vos, van den Hout, & van Lankveld, 2021; Xu et al., 2023). There is evidence to suggest that this continues a trend that has been seen over the decades prior (Beyari, 2023; Sheldon et al., 2021). Many theories have been put forth to explain the rise in mental health issues, such as the increased use of social media Kotera and Ting (2021), the effects of austerity Ma et al. (2020), rising income inequality Arslan (2021), the pressure that young people face to perform well academically Meda et al. (2021), and the numerous difficulties.

The term "interpersonal trust" describes the confidence that exists both within an organization and between its members and external parties (Pellegrini, De Cristofaro, Salvati, Giacomantonio, & Leone, 2021). Interpersonal trust between employees on the same level, as well as between employees and superiors, is referred to as employee trust in the organization. In interpersonal communication, it is akin to an anticipation and a belief about the object (Karim, Majid, Omar, & Aburumman, 2021; Pellegrini et al., 2021). One is prepared to keep up a connection and take on the risks that come with it when they have high expectations for the actions of others. The trust of the Netherlands is distinguished by unique trust. Individuals do not trust strangers; they only trust people with whom they are personally acquainted (X. Zhang et al., 2021). The Netherlands has a severe deficit of general trust. According to Karim et al. (2021), there is high interpersonal trust among acquaintances but low interpersonal trust in the Netherlands society overall. It is typical in an organization to receive compliments on one's professional skill and moral rectitude from one's peers. The organizational structure of the Netherlands is rather flexible, but the people there have an irresponsible attitude that makes them stand apart from issues that are important to them. In this instance, they frequently operate the system, taking into account personal relationships. Xie and Li (2021) examined trust practices in busi-

nesses and discovered that the country hardly ever used institution-based trust.

Humans have an innate need to be socially linked (Lin, Liu, Niu, & Longobardi, 2022). Feelings of loneliness may arise if this drive to fit in is not satisfied. The unpleasant emotion connected to a mismatch between one's ideal and very social interaction levels is known as loneliness (Ibarra, Baez, Cernuzzi, & Casati, 2020). Consequently, the subjective perception of a quantitative or qualitative deficit in one's social ties is loneliness. According to earlier research, loneliness is very widespread in industrialized countries, where 10.5% to 43.5% of the general population reports feeling lonely at some point (Cooper et al., 2021; Heatley Tejada, Dunbar, & Montero, 2020). Moreover, adverse consequences like a higher chance of dying have been linked to loneliness (Schiltz et al., 2021). The high incidence of loneliness, along with its detrimental effects, highlights the significance of studying loneliness and its effects on health. Loneliness has been recognized as a crucial concept in psychological health, defined as a subjectively uncomfortable or unpleasant state that arises from the discrepancy between one's perceived social network and her/his social expectations (K. Zhang, Kim, Silverstein, Song, & Burr, 2021; Tan, Shalilis, & Barkus, 2020).

In terms of economic, social, cultural, or political spheres, social exclusion is described as "the lack of denial of resources, rights, goods, and services, as well as the inability to participate in the normal relationships and activities available to the majority of people in a society" (Naidu et al., 2022; Pellegrini et al., 2021). According to T. Hoang et al. (2019), individuals create bonds, establish connections, and cultivate a sense of belonging through engaging in social interactions. This interaction enhances connections of understanding, cooperation, and empathy, bolstering the social network. Moreover, it is crucial for mental and emotional well-being to engage in social interactions (K. Zhang et al., 2021). Strong social bonds are linked to lower levels of stress, anxiety, and depression, along with higher overall life satisfaction and happiness (Mousa et al., 2021). Frequent social interaction, whether it be through attending community events, hanging out with friends, or joining in-group activities, feeds the human spirit and improves the quality of life (T. V. Hoang et al., 2021; Yu, Wu, & Chi, 2021). The present study determines that social exclusion, social contact on mental health problems, and the mediating role of interpersonal interest and moderating role of loneliness, as well as social identity theory involved. Categorization of our social environment is a natural and unavoidable human instinct, according to SIT, and it helps to make our surround-

ings simpler (Hogg, 2016). Social identification is the process by which we classify ourselves into some of the same groupings that we assign to other individuals. After we "belong" to a group (our "in-group"), we look for methods to benefit from being a part of that group. One strategy to attain those pleasant sensations is to see the in-group more favorably than other groups, or "outgroups." In turn, this leads to the justification of unfavorable attitudes and ideas about outgroups in our surroundings, which in turn leads to prejudice and, eventually, discrimination (Scheepers & Ellemers, 2019). Seeking positive distinctiveness for one's in-group. In recent years, other explanations have been added to the motivational basis of SIT, which is a desire for a positive self-concept (Treppe, 2013). Hogg (2016) suggests that (self-) categorization and intergroup differentiation are strategies for reducing ambiguity. The reality of societal bias and discrimination limits some social groups' capacity to recognize positive differences, especially marginalized or minority groups. Individual and collective belief systems, according to SIT, will determine how a group reacts in these circumstances (Hogg, 2016; Treppe, 2013). A social mobility strategy is when an individual chooses to "leave" one in-group in favor of another that is more highly regarded by society. When people "pass" as belonging to another group or successfully join that group (for example, by becoming citizens of a more desirable national group), this behavior is evident. On the other hand, people might develop a belief system for societal change. These principles motivate people to take action as a group to overthrow the existing quo and improve the standing of their in-group in the social hierarchy (Hogg, 2016; Scheepers & Ellemers, 2019; Treppe, 2013). They try to elevate the status of their in-group rather than leaving it in favor of a more desired outgroup. When in-group identity is strong, barriers between groups are impenetrable, and the status quo is seen as unstable and illegitimate, people are more inclined to support social change beliefs (Hogg, 2016; Scheepers & Ellemers, 2019; Treppe, 2013).

LITERATURE REVIEW

Hypothesis Development

The concept of "social exclusion" is commonly utilized to explain the factors leading to a disconnect between an individual and society (X. Zhang et al., 2021). Social exclusion is a dynamic process that prevents individuals from engaging in different aspects of everyday life, such as social, political, economic, or cultural participation (Beyari, 2023; Gao et al., 2020). Research has indicated that social exclusion encompasses various aspects, including lack in different ar-

reas, and can be seen as a process, result, idea, encounter, or emotion (Mousa et al., 2021; Pellegrini et al., 2021). There remains a disagreement on the methods to gauge social exclusion and the elements that should be considered (Tan et al., 2020). Because social exclusion is a complex concept, it offers a comprehensive understanding of the different ways individuals and populations can be excluded in different situations (Ibarra et al., 2020). After conducting a two-phase scoping review, Walsh and his team gathered data on six different aspects of social exclusion experienced by elderly individuals (T. Hoang et al., 2019). Each case of social exclusion is noticed or expressed in a specific setting (Horton, Hoey, Béraud, Corbett, & White, 2020; Naidu et al., 2022). Social exclusion is closely linked to ethnicity - immigrants belonging to minority groups face higher rates of exclusion from society compared to those from the ethnic majority due to discrimination, lack of employment opportunities, poverty, limited housing access, and lower levels of social and political engagement (K. Zhang et al., 2021). Empirical studies have examined the overall occurrences of social isolation among immigrant populations (Seifert, Cotten, & Xie, 2021). Additionally, older individuals still prefer to communicate through in-person social contacts. Seifert et al. (2021) noted that social media, particularly video chats, is crucial for preserving social connectivity when face-to-face interaction is no longer possible because of personal circumstances. The majority of research, however, focuses on social exclusion among older groups in general or immigrants specifically, leaving the concept of social exclusion in the context of aging immigrant communities largely unidentified. A person's family, network, neighborhood, and social environment all undergo significant demographic changes after immigration, making the social isolation of elderly and immigrant persons an especially urgent concern (Xu et al., 2023). For instance, due to low language skills, lack of mobility, and financial limitations, older immigrants from the Netherlands face difficulties in their social and familial interactions as well as in getting support from their local communities (Bakioğlu et al., 2020; X. Zhang et al., 2021). In addition, they frequently have smaller social and interpersonal networks (Hutten et al. (2021), Rehman, Bhuttah, and You (2020), and following immigration, they frequently have conflict with kids due to acculturation (Beyari, 2023) and (Gao et al., 2020)

H1: Social exclusion has a significant impact on interpersonal interest.

H2: Social contact has a significant impact on interpersonal interest.

According to (Lin et al., 2022), loneliness is the subject-

tive experience of unpleasant feelings regarding unsatisfactory levels and kinds of social interaction, as well as judgments of lack of social support and companionship. According to the "Need to Belong" theory Scheepers and Ellemers (2019), Trepte (2013), people are socialized to seek out secure and fulfilling interpersonal connections because they provide a sense of belonging. The human brain's reward system might not be active if these social demands are not met, which could lead to a profound feeling of loneliness. The quality of life of adults, especially older adults, is greatly impacted by social connections. The features of a person's social network, such as its limited size Bakioglu et al. (2020), lack of diversity Arslan (2021), infrequent encounters K. Zhang et al. (2021), and perceived social isolation Tan et al. (2020), have been linked to health hazards. It has been demonstrated that having few or no social ties increases the risk of dementia by 60% (Schiltz et al., 2021). It is well known that loneliness increases the risk of depression (Cooper et al., 2021; Hutten et al., 2021). It has also been linked to a higher risk of death and a loss of functioning. According to Yu et al. (2021), living alone, social isolation, and perceived loneliness, all raised the chance of dying by about 30%; this effect is similar to that of smoking and obesity. Numerous studies indicate that as we age, social isolation, an objective measure of the absence or low quantity of social interactions and loneliness, a subjective assessment of the "unpleasant" lack of (quality of) social relationships both rise (Bakioglu et al., 2020; Kraav et al., 2021; Lin et al., 2022; Yu et al., 2021). Studies conducted in various geographical and cultural contexts reveal that depending on the nation and the scale employed, levels of social isolation and loneliness fluctuate (K. Zhang et al., 2021; Tan et al., 2020). Indeed, a number of risk factors, including diminished mobility and sensory impairment, as well as a decline in the frequency and quality of interaction and a need for long-term care or supplementary support, are linked to loneliness in old age (Hutten et al., 2021). Widowhood, living distant from family or alone, and health issues (such as chronic sickness and cognitive impairment) are among the factors that predict loneliness and isolation in older individuals (Lin et al., 2022). Even when elderly people converse with one another, it can be difficult to interact. K. Zhang et al. (2021) discussed condescending discourse, painful revelations, and underuse of topical resources, as well as the difficulties of having intergenerational talks. Specifically, anxiety in intergenerational interactions might be caused by a shortage of conversation subjects. These circumstances may have an impact on senior citizens, but more significantly, they are typically outside the affected person's con-

trol (K. Zhang et al., 2021; Ibarra et al., 2020).

According to K. Zhang et al. (2021), loneliness is an unpleasant emotion brought on by a mismatch between one's desired and very social connections. A significant number of adolescents encounter loneliness; according to K. Zhang et al. (2021), 11–20% of individuals between the ages of 12 and 15 said they felt lonely at least "sometimes." From adolescence onward, persistent emotions of loneliness do not change (Kraav et al., 2021). Adolescent boys suffer much higher degrees of loneliness than females, and there is an inverse relationship between loneliness and socioeconomic position (Pellegrini et al., 2021). Teenage loneliness is linked to a number of negative consequences, such as poor mental and physical health (Karim et al., 2021). When people engage in insufficient and disappointing social interactions and encounters, they withdraw from the surroundings and community, leaving them on their own. Loneliness is viewed as a source of sadness since it is perceived as a sign of weakness Xie and Li (2021) and as a discrepancy between an individual's desired and accomplished social ties (Pellegrini et al., 2021). Emotional and social isolation are considered forms of loneliness (Xu et al., 2023). An individual's subjective appraisal of their incapacity to establish a genuine and trustworthy friendship is known as emotional loneliness. A person who experiences social loneliness has fewer friends and social connections than they believe they do (Beyari, 2023; Gao et al., 2020). When people get lonely, they find it harder to make new friends and keep the ones they already have. Therefore, people have the option to concentrate on their flaws rather than their own and other people's advantages (Hogg, 2016; Pellegrini et al., 2021). According to K. Zhang et al. (2021), being alone increases emotions of inadequacy, alienation, and a desire to be alone. It also reduces social bonds. Because of this, someone who is lonely pushes themselves away from reality and faces all of life's challenges by themselves. While there are numerous personal variables that are linked to loneliness, research has shown that loneliness is positively correlated with social contact Heatley Tejada et al. (2020), Horton et al. (2020), Mousa et al. (2021), Naidu et al. (2022), Peirce, Frone, Russell, Cooper, and Mudar (2000), K. Zhang et al. (2021) and negatively correlated with social exclusion (Naidu et al., 2022; Pellegrini et al., 2021; Seifert et al., 2021; Xu et al., 2023). Put another way, people are becoming more isolated as their addiction to the internet grows. Therefore;

H3: Loneliness has a moderating impact on social exclusion and interpersonal interest.

H4: Loneliness has a moderating impact on social contact

and interpersonal interest.

The process of social exclusion is intricate and multifaceted. It might suggest a dearth of assets, rights, products, and services (Fantahun & Taa, 2022). It might also have to do with not being able to engage in typical social interactions and activities. Therefore, social exclusion can affect people in a variety of sectors of their lives, such as the political, social, cultural, or economic ones, and it can have an impact on both the equality and cohesiveness of society as well as the quality of those people's lives (Naidu et al., 2022; Pellegrini et al., 2021). "An individual is socially excluded if he or she does not participate to a reasonable degree over time in certain activities of his or her society, and (a) this is for reasons beyond his or her control, and (b) he or she would like to participate," according to Xu et al. (2023). The effects of social exclusion have been studied in social psychology research, with occasionally conflicting findings. He et al. (2020) and Seifert et al. (2021) have shown that individuals who are excluded may want to form new social ties in order to overcome the unpleasant state of exclusion. The excluded individuals, according to Fantahun and Taa (2022) and He et al. (2020), showed a greater desire to form new relationships and form amiable and good opinions of strangers. Those who are excluded should, therefore, be prepared and eager to assist; however, this was only the case in circumstances where the individual they had to deal with assumed and upheld a cooperative stance (Pellegrini et al., 2021). As an alternative, other research has demonstrated remarkably distinct effects or correlates of exclusion, indicating antagonistic and uncooperative outcomes. For example, studies have found that children who experienced peer rejection exhibited less prosocial behavior Şafak-Ayvazoğlu, Künüroğlu, Van de Vijver, and Yağmur (2021); that social exclusion resulted in aggressive behavior X. Zhang et al. (2021), self-harm He et al. (2020) impulsive and uncontrollable acts Mousa et al. (2022); and feelings of obstructing and non-collaborative behavior (Xu et al., 2023). Thus, social isolation can lead to introversion, closure, disobedience, and antisocial behavior among people.

Even though these seemingly disparate outcomes highlight a core quality shared by those who experience social isolation, according to Şafak-Ayvazoğlu et al. (2021), those who are socially excluded tend to have a distrustful and suspicious attitude toward others instead of forming an initial negative assessment. Since an implicit expectation of reciprocity and belonging is not met, one's own reference group, the social system, or a significant other might really perceive social exclusion as a betrayal of trust (Xie &

Li, 2021). This could be related to the domains listed above that make up an individual's existence. Some of the deprivations that face a person in a state of social exclusion include not having the financial means to meet their own and their family's needs, being in poor health and unable to engage in social or professional activities, and being unable to actively participate in the political and social life of their own nation. People work hard to build their social lives in order to satiate their intense urge to belong (Bakioğlu et al., 2020; Rehman et al., 2020; Yu et al., 2021). When someone is deprived, their sacrifices and efforts to forge the desired social bonds are exposed as ineffective because they haven't produced any benefits linked to inclusion and belonging. As a result, it seems that their faith in other people is misplaced. As a result, people would conclude that it would be best to approach any future social contact with caution and distrust. After being excluded, people may have a persistent suspicion about their future social contacts, which might affect their opinions and attitudes toward other people. Interpersonal trust He et al. (2020) is the term used to describe this mental state, which is characterized by a person's feeling of trust towards other individuals or groups. It expresses how confident somebody feels in the ability of others to act in a just, moral, and predictable way. The normative Şafak-Ayvazoğlu et al. (2021) and rational He et al. (2020) theoretical streams have mostly guided research on interpersonal trust. The normative approach makes the assumption that trust is determined by normative and assigned criteria, i.e., it is based on the widely held conviction in a community that members of that group share the same moral principles and normative standards. People can have expectations regarding fair and honest behavior since these values and standards govern individual behavior (Cooper et al., 2021; Hutten et al., 2021). The rational approach assumes that interrelated interests that bind people rationally encourage interpersonal trust. Because it is essential to fulfill and respect shared interests in order to live in harmony within a society, people develop expectations about the behavior of others (T. Hoang et al., 2019; Ibarra et al., 2020). Trust erodes when people act in ways that disrespect these interrelated interests.

Social contact is one of the most important aspects of studying in the current world. Social contact comes in various forms, such as practical, educational, and emotional assistance, and it facilitates communication with friends, family, classmates, and a host of other individuals (Beyari, 2023; Gao et al., 2020). The term "social support" describes the feeling of having one's closest friends, family, teachers, peers, and other members of one's social group value, nur-

ture, and respect oneself. An individual may receive support from a variety of sources (Mousa et al., 2021; Tan et al., 2020). The normative approach offers a broad perspective on human nature, showing that universal ideas determined by ascribed qualities are what determine trust rather than individual experiences of assumptions about others' reliability. On the other hand, the rational perspective places more emphasis on the acquired than the attributed, suggesting that interpersonal trust is contingent upon the experiences people have had in their social lives (Hogg, 2016; Pellegrini et al., 2021). People acquire specific meanings of cultural and personal characteristics related to reliability through both direct and indirect experiences, and the results of these experiences determine whether or not they would trust someone else (Lin et al., 2022; Mousa et al., 2022). If social interactions directly influence trust, then social exclusion may play a significant role in fostering a distrustful mindset. A person finds it difficult to assume that people can be trusted if they are not given the chance to interact with others in social situations or to meet acquaintances or coworkers (Xie & Li, 2021; Younes et al., 2021). Similar to this, someone who lacks access to resources that are essential to meeting their needs and who is unable to rely on a social and relational structure that can make up for these deficiencies may feel that the normative and moral standards that underpin trust have been broken. As a result, this individual could have a tendency to view those in charge of this system and others in their personal network as being unreliable (Seifert et al., 2021; Xu et al., 2023). These assessments could be expanded to a more abstract level and solidified into a widely held opinion about humans in general. A significant precursor to anti-immigrant sentiments might be the widespread and widespread perception among natives of a host nation that foreigners are unreliable (Bakioğlu et al., 2020; X. Zhang et al., 2021). Thus;

H5: Interpersonal interest has a mediating impact between social exclusion and mental health problems.

H6: Interpersonal interest has a mediating impact between social contact and mental health problems.

Interpersonal interest, which refers to how much individuals are involved and committed in social interactions and relationships, has received a lot of focus in mental health studies because of its important impact on psychological well-being (Karim et al., 2021; Pellegrini et al., 2021). Research on the relationship's impact on mental health, on the other hand, focuses more on mental illness than mental health, examining how much relationships contribute to the etiology of psychological distress and depression, as well as how they interact with other etiological factors like genes, so-

cioeconomic status, and life events (Xie & Li, 2021). From the standpoint of public mental health, the protective effects of healthy relationships, especially parent-child relationships, are just as significant in ensuring that people are sufficiently robust to not only enjoy good mental health for themselves but also to support and sustain the mental health of those around them and the larger community. Three distinct methods have been used in studies on community-dwelling individuals to evaluate relationships (He et al., 2020; Hutten et al., 2021; Xu et al., 2023). Counting people's social contacts or estimating the size of their social networks is one method, independent of the caliber of the connections. According to Cooper et al. (2021) and Ma et al. (2020) those with fewer contacts are more susceptible to mental disease, particularly depression, than people with more. Numerous studies have demonstrated the protective effects of demonstrating interest in others against mental health problems such as sadness, anxiety, and loneliness (Cooper et al., 2021; Ibarra et al., 2020; Ma et al., 2020; Sheldon et al., 2021). Arslan (2021), Meda et al. (2021), and Naidu et al. (2022) demonstrated the connection between lower rates of depression and higher levels of interpersonal involvement, highlighting the importance of social ties in preventing the onset of depressive symptoms. According to Cooper et al. (2021) and Ma et al. (2020), those with stronger social ties and greater interest in relationships typically experience reduced levels of stress and anxiety. According to Cooper et al. (2021) and Ma et al. (2020), teenagers with higher interpersonal interest report feeling less lonely and being more satisfied with their lives. Additionally, Hutten et al. (2021) discovered that social isolation might have a negative impact on mental health, highlighting the importance of maintaining social connections and demonstrating an interest in interpersonal relationships. Xu et al. (2023) found that those who were more interested in interpersonal interactions and had stronger social ties were less likely to experience mental health problems as they grew older. Increased interest in others and stronger sentiments of connection and belongingness are correlated with increased social engagement, according to Foulkes and Andrews (2023) and He et al. (2020). Cooper et al. (2021) and Ma et al. (2020) revealed that regular social interactions are associated with long-term increases in interpersonal interest and a decrease in loneliness, underscoring the long-term benefits of social contact on people's interpersonal health. Similarly, Arslan (2021); Beyari (2023), and (Schiltz et al., 2021) showed the long-term beneficial effects of social ties on psychological wellness by demonstrating how social ties positively influence mental health.

Numerous studies have demonstrated that demonstrating interest in other people can serve as a protective factor against mental health conditions such as loneliness, anxiety, and depression. Similarly, Ibarra et al. (2020) and Meda

et al. (2021) revealed that increased interpersonal connections were linked to decreased feelings of loneliness and increased overall satisfaction with life.

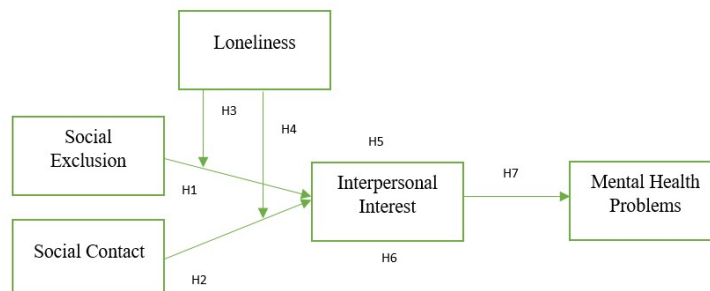


FIGURE 1. Conceptual framework

METHODOLOGY

The present study investigated how social exclusion and social contact impact mental health problems among refugees living in the Netherlands, mediating the role of interpersonal interest and moderating the role of loneliness part of this research. The methodology mainly covers data collection, analysis techniques used, and sampling techniques used in the present study. A cross-sectional approach was used for data collection from 220 refugees living in the Netherlands.

Non-probability sampling was chosen because of the uncertainty. The number of refugees living in the Netherlands. Convenience sampling, a type of nonprobability sampling, was used to choose participants based on their ease of access and desire to take part in the research. After collecting the information, Smart PLS (Partial Least Squares) was utilized. The analysis of data was conducted using Squares. Smart PLS is a strong statistical method that is appropriate and ideal for analyzing relationships in complex models with multiple variables suggested in this research. The analysis involved conducting hypothesis testing to investigate the connections between the independent variables (social contact and social exclusion) and the mediator variable health). The moderator variable (loneliness), interpersonal interest, and mental health are the dependent variables of medical conditions. Statistics were utilized to describe the demographic participants' characteristics and the variables of concern.

Data Collection

The primary data collection instrument was a survey questionnaire adapted from existing scales to measure the variables of interest. The questionnaire utilized a 5-point Lik-

ert scale for responses. Social contact as an independent variable was measured by Peirce et al. (2000), adopting the 5 items, and social exclusion was measured by Pellegrini et al. (2021), adopting the 4 items. Loneliness as a moderator was measured by Hughes, Waite, Hawkey, and Cacioppo (2004) adapting the 5-item scale, and Interpersonal Interest was the mediator, and it was measured by Pellegrini et al. (2021) adapting the 5 items as well. Mental Health Problems were the outcome variable measured by Beyari (2023), adapting the 5-item scale. The questionnaire also included demographic questions to gather information about participants' background characteristics. Participants were approached and invited to participate in the study. The purpose of the research, confidentiality of responses, and voluntary nature of participation were explained to potential participants. Before participating in the study, all participants provided informed consent. After receiving the survey questionnaire, participants were instructed on how to complete it. They were assured that their responses would be kept private and used exclusively for study. The survey was thoroughly evaluated by a research agency with specialists in the topic and culture before it was sent out to respondents. To avoid misunderstandings, it was also translated into Modern Standard Arabic. We look into the processes that explain Syrians' belonging because most integration changes occur in the first few months following arrival and can have a significant impact on how the refugees' lives develop in the host country.

RESEARCH ANALYSIS

The PLS assessment consists of two stages: the inner model and the outer model.(Cheah, Thurasamy, Memon, Chuah, & Ting, 2020), the outer model is commonly called a measur-

ing model, while the inner model is also known as a structural model. A structural model is utilized to confirm the

proposed connections. Therefore, PLS is employed to assess the proposed causal connections in the study.

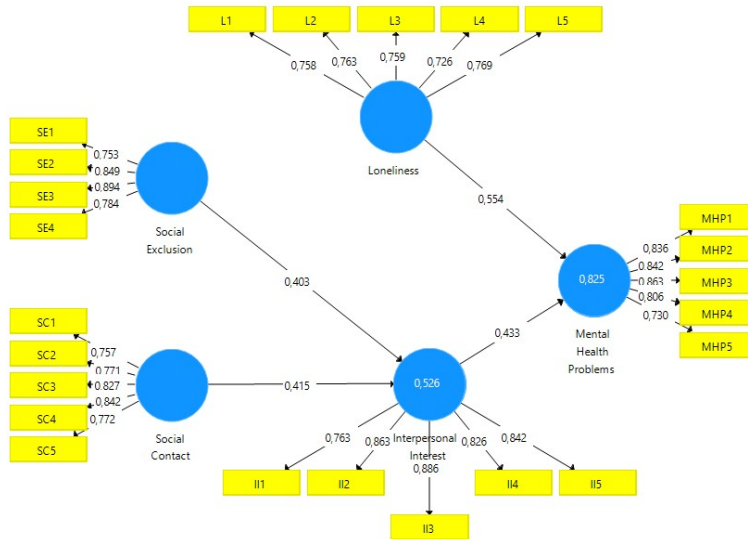


FIGURE 2. Measurement Model Evaluation

TABLE 1. Reliability and validity

Construct	Item	Loadings	CA	CR	AVE
Interpersonal Interest	II1	0.763	0.892	0.921	0.701
	II2	0.863			
	II3	0.886			
	II4	0.826			
	II5	0.842			
Loneliness	L1	0.758	0.816	0.869	0.571
	L2	0.763			
	L3	0.759			
	L4	0.726			
	L5	0.769			
Mental Health Problems	MHP1	0.836	0.874	0.909	0.667
	MHP2	0.842			
	MHP3	0.863			
	MHP4	0.806			
	MHP5	0.730			
Social Contact	SC1	0.757	0.854	0.895	0.631
	SC2	0.771			
	SC3	0.827			
	SC4	0.842			
	SC5	0.772			
Social Exclusion	SE1	0.753	0.838	0.892	0.675
	SE2	0.849			
	SE3	0.894			
	SE4	0.784			

Research is being conducted. Assessing convergent validity via Average Variance Extracted (AVE) is utilized for evaluation. Explain the level of diversity or range of observable variables that a latent variable can encompass. For built models, the anticipated Average Variance Extracted (AVE) should exceed 0.5. Assessment of the validity of convergence is determined by measuring internal consistency reliability through Cronbach's Coefficient value. Alpha (CA) and Composite Reliability (CR) are both measures of internal consistency (Cheah et al., 2020). The anticipated CA and CR values are greater than 0.7. reworded text will only be provided if the original text is provided. The AVE, CA, and CR values can be observed in Table 1.

The current study utilized the J. Hair, Hollingsworth, Randolph, and Chong (2017) and J. F. Hair, Risher, Sarstedt, and Ringle (2019) approach to confirm discriminant validity.

TABLE 2. Discriminant validity

	II	L	MHP	SC	SE
Interpersonal Interest	0.837				
Loneliness	0.688	0.755			
Mental Health Problems	0.814	0.852	0.817		
Social Contact	0.647	0.698	0.617	0.795	
Social Exclusion	0.641	0.693	0.663	0.575	0.822

Next, we will examine how both exogenous variables contribute to the overall effect. Examining the impact of social exclusion and social interactions on mental health issues as internal variables observing the outcomes of the overall impact or R-squared value. R-Square variations can be utilized to determine the impact of external hidden factors (X) on internal hidden factors (Y), how they influence each other (Risher & Hair Jr, 2017), and whether or not they will have a significant impact. An R-Square value of 0.70 suggests the model is strong, while 0.50 indicates 0.5 indicates the model is at a moderate level, whereas 0.25 indicates the model is at a weak level, according to J. Hair et al. (2017) and J. F. Hair et al. (2019). The construct contains the R-Square values below:

TABLE 3. Assessment of R-Square

	R-Square	Adjusted R-Square
Interpersonal Interest	0.526	0.524
Mental Health Problems	0.825	0.824

J. Hair et al. (2017) and J. F. Hair et al. (2019) stated that the structural model serves as the theoretical basis for utilizing structural equations in assessing the internal path model. All assumptions were confirmed through the utilization of SmartPLS 3.0's (SEM). J. Hair et al. (2017) and J. F. Hair et

Table 2 shows that each number on the diagonal is greater than every other value. Discriminant validity can be used to quantify concepts that are not conceptually related. J. Hair et al. (2017) and J. F. Hair et al. (2019) point out that discriminant validation aims to show any discriminating occurrences based on differences among components. Discriminant validity was used to assess and characterize unrelated constructs. In addition, discriminant validity serves as a confirmation of the distinctiveness of each metric associated with component diversity. To determine measure correspondence, it is essential to evaluate elements that do not have any statistical relationship for discriminant validity. A factor AVE can calculate discriminant validity. The discriminant validity showed that the square root of each construct and its average variance explained had stronger correlations with different constructs than with each other.

al. (2019) utilized standardized root-mean-square residual (SRMR), chi-square, and normed fit index to evaluate the model's fit. The expected matrix is compared to the measured covariance using the SRMR value. An SRMR value of 0.098 is considered high but still within an acceptable range.

TABLE 4. Assessment of SRMR

Saturated Model	
SRMR	0.098

The researcher assesses the impact by utilizing the path coefficient, according to the outcomes of the study results of the path coefficients as calculated using SmartPLS version 3.0 bootstrapping. The power of the connections within the structure. Furthermore, several connections and a mediator analysis were conducted to assess specific aspects of indirect impacts to identify crucial factors mediating influences. In the bootstrap method (in this research), we utilized 5000 bootstrap samples selected at random in our analysis to evaluate the intermediary impact. The significance of this is that it can create the confidence interval with the highest level of precision for indirect impacts. The primary structural models utilized in this study were the

direct-relation structural model, the mediation structural model, and the structural model with moderating variables. Bootstrapping is provided with accuracy evaluations like biases, variability, standard errors, coefficient of determination, etc. Utilizing the survey approach allows for the estimation of the sample distribution for a wide range of statistics (Cheah et al., 2020). It can also be utilized in formulat-

ing tests for hypotheses. In cases where a parametric model is unclear, unachievable, or requires complex formulas to calculate standard errors, it is often used as a substitute for statistical assumptions (Cheah et al., 2020). Table 4.9 illustrates that the p-value is below 0.05 for all confirmed and approved hypotheses, while it is above 0.05 for all dismissed hypotheses.

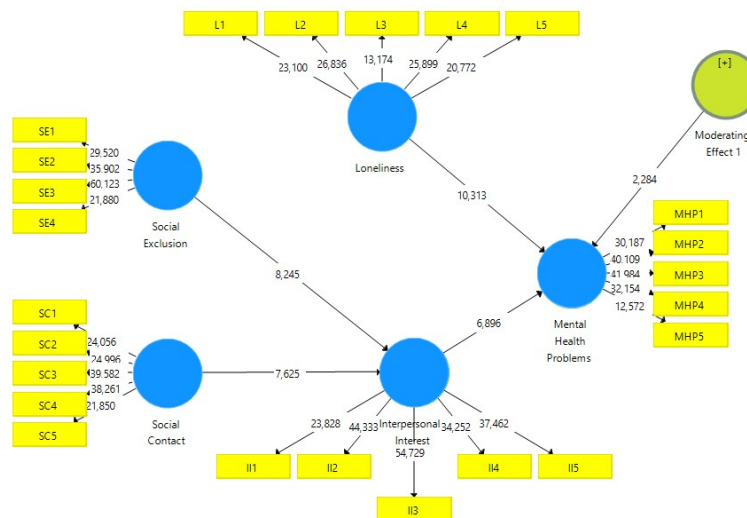


FIGURE 3. Structural model evaluation

This part focuses on the structural model after studying the direct relationships in the measurement model, as outlined by J. Hair et al. (2017) and J. F. Hair et al. (2019). Hypothesis testing is employed to examine the dependence between the relationships. In Partial Least Squares (PLS), the structural model examines the direct relationships between the constructs in the study and their associated t-values and path coefficients. In regression analysis, the path coefficient is equal to a standardized beta coefficient, as stated by J. Hair et al. (2017) and J. F. Hair et al. (2019). J. Hair et al. (2017) and J. F. Hair et al. (2019) stated that T-values exceeding 1.64 are deemed statistically significant and are therefore utilized to determine the outcome of the hypothesis in question.

J. Hair et al. (2017) and J. F. Hair et al. (2019) sought to identify the mediation factors that, during testing, enhanced the effect of the independent variables on the dependent variable. Mediation analyses have been conducted using the

Baron and Kenny (1986), the Sobel test Sobel (1986), and bootstrapping techniques (J. Hair et al., 2017; J. F. Hair et al., 2019; Risher & Hair Jr, 2017). The "re-sampling mediation technique (bootstrapping)" is employed by the study to investigate the indirect effects of various variables in the current investigation. In order to determine which variable affects the direction or strength of the link between the independent and dependent variables, (Cheah et al., 2020) suggested doing a moderation test. According to (Cheah et al., 2020), a moderator variable is usually used when the link between the independent and dependent variables is shaky or untrustworthy. Moreover, a number of techniques exist for investigating moderation effects, like the three-phase hegemonic regression approach. Nevertheless, this method's disadvantage is that interaction terms must be manually computed by calculating and manipulating variables.

TABLE 5. Result of hypothesis testing

	Relationships	B-value	Standard Deviation	t value	P value	Decision
H1	Social contact -> Interpersonal Interest	0.415	0.054	7.625	0.000	Accept
H2	Social exclusion -> Interpersonal Interest	0.403	0.049	8.245	0.000	Accept
H3	Social exclusion -> Interpersonal Interest -> Mental Health Problems	0.182	0.039	4.673	0.000	Accept
H4	Social Contact -> Interpersonal Interest -> Mental Health Problems	0.187	0.030	6.141	0.000	Accept
H5	Moderating Effect 1 -> Mental Health Problems	-0.083	0.036	2.284	0.023	Accept
H6	Interpersonal Interest -> Mental Health Problems	0.451	0.065	6.896	0.000	Accept

DISCUSSION

The current research studies the impact of social exclusion and social contact on mental health issues, with a focus on the mediating role of interpersonal interest and the moderating role of loneliness in the context of social identity theory. All hypotheses were confirmed. The first and second hypotheses show that social exclusion and social contact have significant and positive impacts on interpersonal interest. According to several studies, social exclusion frequently leads to negative psychological reactions like lowered self-worth and emotions of being unwanted (Fantahun & Taa, 2022; Mousa et al., 2022). The findings of the recent study reveal a surprising result: social exclusion seems to increase interpersonal interest. This unexpected discovery could be explained by the increased desire for social interaction when people feel excluded. Studies in social psychology provide evidence that people have a natural desire for connections and belonging in social groups (Xie & Li, 2021; Younes et al., 2021). Consequently, those who feel excluded could try harder to connect with others and become more interested in social situations when they do so. Furthermore, the favorable impact of social contact on interpersonal interest emphasizes the significance of social interaction in fostering interpersonal bonds. Several mental benefits, including an increased sense of belonging and improved general health, have been linked to positive connections with others (Bakioğlu et al., 2020; X. Zhang et al., 2021). This provides credibility to the theory that perceptions of the availability of social support are influenced by interactions with friends, family, and group activities. Subsequent studies ought to investigate social support predictors in greater detail. It would be interesting to observe how the sense of social interaction is influenced by social integration (as opposed to merely contact) with family, friends, and social and professional institutions. Additionally, our results aligned with previous studies that looked at the relationship between interpersonal trust, social contact, and social exclusion (T. Hoang et al., 2019; Horton et al., 2020; Ibarra et al., 2020; Naidu et al., 2022).

According to the third and fourth hypotheses, social exclusion, social contact, and interpersonal interest are all moderately impacted by loneliness. However, at distinct levels of the social structure, social exclusion and loneliness were both thought to represent subjective sensations resulting from a failure to satisfy the fundamental human desire of belonging (Kraav et al., 2021). According to prevailing wisdom, loneliness results from a person's subjective perception of micro- or meso-level social integration and is said to emerge when there is a deficiency in one or more of their social networks, whether structural, functional, or qualitative. On the other hand, social exclusion refers to a person's sense of not belonging to society as a whole and is probably founded on a subjective view of not aligning with macro-level normative norms (K. Zhang et al., 2021). However, identifying the difference between the sense of exclusion from fulfilling social interactions and the sense of not belonging to society adds more conceptual clarity. Perceived social exclusion and exclusion from social ties are conceptual terms that relate to distinct social structure levels. We learn more about the mechanisms underlying the development and interaction of perceived social exclusion and felt exclusion from social contacts (here measured as loneliness) by treating them as such in the current study. Specifically, we think that loneliness and perceived social exclusion are two different but linked ideas for at least three reasons. First, unmet social needs are the root cause of both perceived social exclusion and loneliness. Second, there are risk variables in common between the two experiences of social inadequacies. Because people make sense of the outside world and learn about societal norms outlining what is socially acceptable or valued through their interactions with others, we infer that loneliness can lead to a perception of social exclusion. For example, people frequently base their opinion of their own values on traits they believe would increase their chances of being accepted by others (Hutten et al., 2021; Ibarra et al., 2020). Likewise, people's perceptions of their own values are largely shaped by experiences of being accepted or rejected by important people

(Schiltz et al., 2021; Tan et al., 2020). Furthermore, lonely people tend to have poorer self-esteem and regard their social environment as more hostile and unfriendly than people who think of themselves as well-integrated (Cooper et al., 2021). As a result, loneliness may exacerbate disjunction, which Hutten et al. (2021) describe as the perception of a discrepancy between one's own ideals, opportunities, and accomplishments and those of society. Thus, loneliness may cause people to question their own value to society as a whole and may prevent them from having the chance to receive recognition and awards that could serve to affirm their position as important members of society.

The relationship between social exclusion, social contact, and mental health issues is mediated by interpersonal interest, as demonstrated by the fifth and sixth hypotheses. Engaging in meaningful social connections can increase curiosity about other people and foster a sense of belonging and connection that protects against mental health problems. Consequently, one of the main ways that social contacts improve mental health is through the influence of interpersonal interest. The events most likely include the elements postulated as enabling conditions and create an environment favorable to disclosure. It is also possible that the activities' clear focus on mental health enhanced the value of social interaction. Increased salience has been linked to improved intergroup connections and better interactions with people, according to other studies (T. V. Hoang et al., 2021; Xie & Li, 2021; Younes et al., 2021). It is interesting to note that people without mental health issues were better able to recall their interaction than people with mental health issues, indicating that people without mental health issues found the conversation more memorable. According to more studies, people without mental health issues may have a notable change in their follow-up after learning about the firsthand experiences of those with mental health issues. Since the majority of the sample had experienced mental health issues, key outcomes for this group include lowering public stigma among participants without prior experience with mental health issues as well as empowerment, disclosure encouragement, participation in anti-stigma efforts, and social distancing from other in-group members (Gao et al., 2020; Kotera & Ting, 2021; Sheldon et al., 2021).

According to the hypothesis, interpersonal interest significantly affects mental health issues. Studies show that individuals with a strong social interaction interest typically have better mental health, with reduced rates of psychological distress, anxiety, and depression (He et al., 2020; Hutten et al., 2021; Xu et al., 2023). The capacity of interpersonal

interactions to satiate fundamental human needs for social connections and a sense of belonging makes them crucial in managing mental health disorders. According to social identity theory, Scheepers and Ellemers (2019), social connections are essential for emotional regulation, stress management, and overall well-being in humans, as they are social beings by nature. In fact, we discovered that declines in generalized trust were correlated with increases in social exclusion. A person experiences social isolation because of the aforementioned deprivations in the various areas of their life. People eventually pinpoint the origin of their situation of exclusion in the social system to which they belong and in the individuals who make up that system when they are unable to participate in some activities of their society over time for reasons outside of their control. In this sense, the implicit and fundamental act of community membership is violated, and the faith that is placed in its members wanes. A generalized mistrust of other individuals is created when this illness spreads widely and is constant (Horton et al., 2020). Ibarra et al. (2020) and K. Zhang et al. (2021) studies, which suggested that individuals who are socially excluded are driven to shield themselves from the prospect of experiencing social exclusion in the future. To this end, they develop a wary and suspicious attitude toward strangers, of whom immigrants are a prime example. The lack of commonalities (such as norms, values, and beliefs) among indigenous makes it difficult to establish interpersonal trust. Hence, people from different ethnic groups are usually viewed negatively. As a result, we discovered a negative correlation between anti-immigration sentiments and interpersonal trust. Put differently, our findings indicated that negative attitudes against immigrants decreased as people's confidence in generalized outsiders rose. Pellegrini et al. (2021), Schiltz et al. (2021), and Xu et al. (2023) found that interpersonal trust was the most reliable indicator of anti-immigrant sentiment.

Research Implications

The study expands on our knowledge of how social interactions affect mental health issues by examining the effects of social contact and isolation. The results underline that when analyzing how social experiences affect mental health outcomes, individual variances in loneliness and interpersonal interest must be taken into consideration. This is in line with the core principles of social identity theory, which place emphasis on the role that social recognition, grouping, and comparison have in influencing people's behaviors and beliefs of themselves. Furthermore, the study broadens our theoretical knowledge by examining the roles that

loneliness and interpersonal interest play as moderating and mediating factors in the association between social experiences and mental health. By clarifying these complex linkages, the investigation advances knowledge of the psychological mechanisms relating social interactions to mental health. This theoretical framework offers researchers a thorough perspective to examine the intricate interactions between social identity formation, interpersonal relationships, and the implications for mental health. The results of the study also provide insight into how social support and connection may mitigate the negative impact that social exclusion and loneliness have on mental health. This is consistent with the focus placed by social identity theory on the importance of social connections in promoting a feeling of identity and self-worth. Numerous practical implications of the study's findings to social policy and mental health interventions exist. The study highlights the significance of establishing meaningful relationships and pleasant social interactions as a means of enhancing mental well-being, with a particular focus on interpersonal interest as a vital mediator. Initiatives aimed at reducing social isolation and increasing social interaction should prioritize the development of interpersonal relationships and the provision of opportunities for social involvement. Moreover, the identification of loneliness as a moderating factor in the research underscores the importance of customized interventions that address the distinct emotional needs of those experiencing loneliness. Interventions may mitigate the negative effects of loneliness on mental health by offering focused assistance and resources to combat feelings of isolation and fortify social bonds. This includes community-based initiatives, support networks, and virtual spaces that foster interpersonal communication and a feeling of community. The study's findings also emphasize how important it is to consider mental health within the larger context of social identity and interpersonal relationships. Social issues such as social exclusion, social interactions, and loneliness have an impact on people's mental health, and this needs to be included in social policies aimed at improving mental health. Policymakers can improve tactics to address social determinants impacting mental health and build community resilience by integrating social identity theory into mental health promotion activities.

Research Limitations and Future Studies

Firstly, only 220 migrants in the Netherlands provided the data, so the sample size may not be sufficient to accurately capture the diversity and complexity of experiences among this population of refugees. As a result, not all refugees liv-

ing in the Netherlands or other countries may be covered by the results. Larger and more diverse sample sizes could be used in future research to increase the results' external validity. The utilization of a cross-sectional methodology in this research restricts the capacity to determine causal connections among variables. The research looks at how social exclusion, social contact, interpersonal interest, loneliness, and mental health issues are linked, but it is unable to determine the order or timing of these connections. Long-term research would offer a deeper insight into the progression of these factors over time and their influence on the mental health results of refugees. Relying on self-report measures via questionnaires could lead to biases like social desirability or recall bias. Participants could give answers that they believe are socially appropriate, or they might struggle to remember previous events accurately. Future studies could utilize both self-reported measures and objective evaluations (such as clinical interviews and observational data) to improve the accuracy and dependability of the results. Interpreting and measuring constructs like social exclusion, social contact, interpersonal interest, loneliness, and mental health issues can be problematic due to potential errors and differing interpretations. Although the survey probably contained proven measures, differences in participants' understanding and reactions to these items may affect the reliability and validity of the findings. Future studies may improve measurement tools and guarantee cross-cultural validity and reliability in refugee communities.

In the future, studies could use long-term research designs to explore the changing relationships between social interactions, interpersonal relationships, and mental health results among refugees. Long-term studies could help analyze cause-and-effect connections and pinpoint crucial moments or changes that affect the development of mental health patterns. Qualitative research can enhance quantitative results by delving deeper into refugees' experiences, perceptions, and coping mechanisms regarding social exclusion, social interactions, personal relationships, loneliness, and mental health problems. Qualitative techniques like interviews or focus groups can capture detailed insights and contextual factors that quantitative measures alone may miss. Future research may explore how effective interventions aimed at enhancing social inclusion, improving social support networks, and addressing mental health concerns within refugee communities are. Intervention studies could use strict experimental designs to evaluate how certain interventions can enhance mental health outcomes and decrease social inequalities among refugees. Comparing different refugee populations and host countries in re-

search could reveal how cultural and contextual factors affect the connection between social experiences and mental health results.

CONCLUSION

The present study determines that social contact, social exclusion on mental health problems, mediating role of interpersonal trust and moderating role of loneliness, as well as social identity theory involved. In particular, our findings imply that people take cues about their social value from the persons with whom they are most immediately in contact since loneliness is the primary factor influencing changes in social marginalization even after three years. Furthermore, given their strong link that remains even after adjusting for a wide range of risk factors, it appears that social exclusion and loneliness are similar in that they both stem from a failure to have one's social needs, albeit at varying degrees, adequately satisfied. However, this does not mean that, according to earlier research, loneliness should be viewed as a component of social exclusion. Our findings indicate that it is best to approach them as different but related concepts in order to achieve greater conceptual clarity. These results suggest that, by preserving social interaction, engaging in online activities may help older adults feel less lonely. Intervention programs that aim to eliminate loneliness through internet-based methods can think

about teaching their participants how to utilize the internet for social purposes and to make connections with others. To understand how and whether these interventions improve health, additional study is necessary, as there is a dearth of data on the impact of loneliness interventions on health. Moreover, the correlation between mental health and loneliness may suggest the presence of other mediating factors. Additional mechanisms, including sleep disturbance, physiological functioning, stress responses, immune functioning, and health behavior, have been proposed by the research on loneliness as ways in which loneliness contributes to problems with physical and mental health. Social contacts may also be facilitated by newly claimed areas by refugees. As a result, they present a chance to connect with new people in an unfamiliar setting. However, interviews revealed that home is more than just a question of preference. In this situation, they are also negatively formed by a concrete dispersal policy that assigns people to locations at random and seldom takes into account familial ties. The (mis) recognition and unfavorable labeling by others negatively shape them. In addition to considering this, policymakers tasked with dispersal should also seek to better grasp the multisite and open-ended aspects of homemaking that entail sticky, concrete local areas where refugees feel a sense of belonging and restoration.

REFERENCES

- Arslan, G. (2021). School belongingness, well-being, and mental health among adolescents: Exploring the role of loneliness. *Australian Journal of Psychology*, 73(1), 70-80.
- Bakioğlu, F., et al. (2020). Internet addiction and social self-efficacy: The mediator role of loneliness. *Anales de Psicología/Annals of Psychology*, 36(3), 435-442.
- Baron, R. M., & Kenny, D. A. (1986). The moderator-mediator variable distinction in social psychological research: Conceptual, strategic, and statistical considerations. *Journal of Personality and Social Psychology*, 51(6), 1173.
- Beyari, H. (2023). The relationship between social media and the increase in mental health problems. *International Journal of Environmental Research and Public Health*, 20(3), 2383.
- Cheah, J.-H., Thurasamy, R., Memon, M. A., Chuah, F., & Ting, H. (2020). Multigroup analysis using SmartPLS: Step-by-step guidelines for business research. *Asian Journal of Business Research*, 10(3), I-XIX.
- Cooper, K., Hards, E., Moltrecht, B., Reynolds, S., Shum, A., McElroy, E., & Loades, M. (2021). Loneliness, social relationships, and mental health in adolescents during the covid-19 pandemic. *Journal of Affective Disorders*, 289, 98-104.
- de Hoon, M., Vink, M., & Schmeets, H. (2021). On the move again? Residential trajectories of refugees after obtaining asylum in the Netherlands. *Population, Space and Place*, 27(2), e2386.
- Fantahun, T., & Taa, B. (2022). Children of the street: The cause and consequence of their social exclusion in Gondar city, North West Ethiopia. *Cogent Social Sciences*, 8(1), 2068268.
- Foulkes, L., & Andrews, J. L. (2023). Are mental health awareness efforts contributing to the rise in reported mental health problems? A call to test the prevalence inflation hypothesis. *New Ideas in Psychology*, 69, 101010.
- Gao, J., Zheng, P., Jia, Y., Chen, H., Mao, Y., Chen, S., ... Dai, J. (2020). Mental health problems and social media exposure during covid-19 outbreak. *Plos One*, 15(4), e0231924.

- Hair, J., Hollingsworth, C. L., Randolph, A. B., & Chong, A. Y. L. (2017). An updated and expanded assessment of PLS-SEM in information systems research. *Industrial Management & Data Systems*, 117(3), 442-458.
- Hair, J. F., Risher, J. J., Sarstedt, M., & Ringle, C. M. (2019). When to use and how to report the results of PLS-SEM. *European Business review*, 31(1), 2-24.
- He, J., He, L., Zhou, W., Nie, X., & He, M. (2020). Discrimination and social exclusion in the outbreak of covid-19. *International journal of environmental research and public health*, 17(8), 2933.
- Heatley Tejada, A., Dunbar, R., & Montero, M. (2020). Physical contact and loneliness: being touched reduces perceptions of loneliness. *Adaptive Human Behavior and Physiology*, 6, 292-306.
- Hoang, T., Coletti, P., Melegaro, A., Wallinga, J., Grijalva, C. G., Edmunds, J. W., ... Hens, N. (2019). A systematic review of social contact surveys to inform transmission models of close-contact infections. *Epidemiology*, 30(5), 723-736.
- Hoang, T. V., Coletti, P., Kifle, Y. W., Kerckhove, K. V., Verduyck, S., Willem, L., ... Hens, N. (2021). Close contact infection dynamics over time: Insights from a second large-scale social contact survey in Flanders, Belgium, in 2010-2011. *BMC infectious diseases*, 21, 1-15.
- Hogg, M. A. (2016). *Social identity theory*. New York, NY:Springer.
- Horton, K. C., Hoey, A. L., Béraud, G., Corbett, E. L., & White, R. G. (2020). Systematic review and meta-analysis of sex differences in social contact patterns and implications for tuberculosis transmission and control. *Emerging Infectious Diseases*, 26(5), 910.
- Hughes, M. E., Waite, L. J., Hawkey, L. C., & Cacioppo, J. T. (2004). A short scale for measuring loneliness in large surveys: Results from two population-based studies. *Research on aging*, 26(6), 655-672.
- Hutten, E., Jongen, E. M., Vos, A. E., van den Hout, A. J., & van Lankveld, J. J. (2021). Loneliness and mental health: The mediating effect of perceived social support. *International Journal of Environmental Research and Public Health*, 18(22), 11963.
- Ibarra, F., Baez, M., Cernuzzi, L., & Casati, F. (2020). A systematic review on technology-supported interventions to improve old-age social wellbeing: Loneliness, social isolation, and connectedness. *Journal of Healthcare Engineering*, 2020(1), 2036842.
- Karim, D. N., Majid, A. H. A., Omar, K., & Aburumman, O. J. (2021). The mediating effect of interpersonal distrust on the relationship between perceived organizational politics and workplace ostracism in higher education institutions. *Heliyon*, 7(6).
- Kotera, Y., & Ting, S. (2021). Positive psychology of Malaysian university students: Impacts of engagement, motivation, self-compassion, and well-being on mental health. *International Journal of Mental Health and Addiction*, 19(1), 227-239.
- Kraav, S., Lehto, S. M., Junttila, N., Ruusunen, A., Kauhanen, J., Hantunen, S., & Tolmunen, T. (2021). Depression and loneliness may have a direct connection without mediating factors. *Nordic Journal of Psychiatry*, 75(7), 553-557.
- Lin, S., Liu, D., Niu, G., & Longobardi, C. (2022). Active social network sites use and loneliness: the mediating role of social support and self-esteem. *Current Psychology*, 41(3), 1279-1286.
- Ma, Z., Zhao, J., Li, Y., Chen, D., Wang, T., Zhang, Z., ... others (2020). Mental health problems and correlates among 746 217 college students during the coronavirus disease 2019 outbreak in China. *Epidemiology and Psychiatric Sciences*, 29, e181.
- Meda, N., Pardini, S., Slongo, I., Bodini, L., Zordan, M. A., Rigobello, P., ... Novara, C. (2021). Students' mental health problems before, during, and after COVID-19 lockdown in Italy. *Journal of Psychiatric Research*, 134, 69-77.
- Mousa, A., Winskill, P., Watson, O. J., Ratmann, O., Monod, M., Ajelli, M., ... others (2021). Social contact patterns and implications for infectious disease transmission-A systematic review and meta-analysis of contact surveys. *eLife*, 10, e70294.
- Mousa, A., Winskill, P., Watson, O. J., Ratmann, O., Monod, M., Ajelli, M., ... others (2022). Author response: Social contact patterns and implications for infectious disease transmission-a systematic review and meta-analysis of contact surveys. *eLife*, 10.
- Naidu, S. C., Persaud, M., Sheikhan, N. Y., Sem, G., O'Driscoll, V., Diamond, L., ... Kuluski, K. (2022). Student-senior isolation prevention partnership: a canada-wide programme to mitigate social exclusion during the covid-19 pandemic. *Health Promotion International*, 37(2), daab118.
- Peirce, R. S., Frone, M. R., Russell, M., Cooper, M. L., & Mudar, P. (2000). A longitudinal model of social contact, social support, depression, and alcohol use. *Health Psychology*, 19(1), 28.

- Pellegrini, V., De Cristofaro, V., Salvati, M., Giacomantonio, M., & Leone, L. (2021). Social exclusion and anti-immigration attitudes in Europe: The mediating role of interpersonal trust. *Social Indicators Research*, 155(2), 697-724.
- Rehman, A. U., Bhuttah, T. M., & You, X. (2020). Linking burnout to psychological well-being: The mediating role of social support and learning motivation. *Psychology Research and Behavior Management*, 13, 545-554.
- Risher, J., & Hair Jr, J. F. (2017). The robustness of PLS across disciplines. *Academy of Business Journal*, 1, 47-55.
- Şafak-Ayvazoğlu, A., Künüroğlu, F., Van de Vijver, F., & Yağmur, K. (2021). Acculturation of syrian refugees in the netherlands: religion as social identity and boundary marker. *Journal of Refugee Studies*, 34(1), 555-578.
- Scheepers, D., & Ellemers, N. (2019). Social psychology in action: Evidence-based interventions from theory to practice. In (chap. Social identity theory). New York, NY: Springer.
- Schiltz, H. K., McVey, A. J., Dolan Wozniak, B., Haendel, A. D., Stanley, R., Arias, A., ... Van Hecke, A. V. (2021). The role of loneliness as a mediator between autism features and mental health among autistic young adults. *Autism*, 25(2), 545-555.
- Seifert, A., Cotten, S. R., & Xie, B. (2021). A double burden of exclusion? Digital and social exclusion of older adults in times of COVID-19. *The Journals of Gerontology: Series B*, 76(3), e99-e103.
- Sheldon, E., Simmonds-Buckley, M., Bone, C., Mascarenhas, T., Chan, N., Wincott, M., ... Barkham, M. (2021). Prevalence and risk factors for mental health problems in university undergraduate students: A systematic review with meta-analysis. *Journal of affective disorders*, 287, 282-292.
- Sobel, M. E. (1986). Some new results on indirect effects and their standard errors in covariance structure models. *Sociological Methodology*, 16, 159-186.
- Tan, M., Shallis, A., & Barkus, E. (2020). Social anhedonia and social functioning: Loneliness as a mediator. *PsyCh journal*, 9(2), 280-289.
- Trepte, S. (2013). Social identity theory. In *Psychology of entertainment* (p. 255-271). England, UK: Routledge.
- Van Liempt, I., & Staring, R. (2023). Homemaking and places of restoration: Belonging within and beyond places assigned to syrian refugees in the netherlands. In *Cities, migration, and governance* (pp. 142--160). England, UK: Routledge.
- Xie, B., & Li, M. (2021). Coworker Guanxi and job performance: Based on the mediating effect of interpersonal trust. *Technological Forecasting and Social Change*, 171, 120981.
- Xu, L., Li, J., Mao, W., & Chi, I. (2023). Exploration of social exclusion among older chinese immigrants in the usa. *International Journal of Environmental Research and Public Health*, 20(3), 2539.
- Younes, Y., Ghorashi, H., & Ponzoni, E. (2021). Conflicting experiences with welcoming encounters: Narratives of newly arrived refugees in the netherlands. *Social Inclusion*, 9(4), 222-231.
- Yu, K., Wu, S., & Chi, I. (2021). Internet use and loneliness of older adults over time: The mediating effect of social contact. *The Journals of Gerontology: Series B*, 76(3), 541-550.
- Zhang, K., Kim, K., Silverstein, N. M., Song, Q., & Burr, J. A. (2021). Social media communication and loneliness among older adults: The mediating roles of social support and social contact. *The Gerontologist*, 61(6), 888-896.
- Zhang, X., Huang, P., Li, B., Xu, W., Li, W., & Zhou, B. (2021). The influence of interpersonal relationships on school adaptation among chinese university students during covid-19 control period: Multiple mediating roles of social support and resilience. *Journal of Affective Disorders*, 285, 97-104.