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Brexit, acculturative stress and mental health among EU citizens in Scotland

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Abstract

The 'Brexit' referendum represents a hostile shift in the United Kingdom's acculturative context. With its remain majority and pro-migration political discourse, Scotland appears less hostile than the rest of the United Kingdom. We explored whether and how Brexit affected the mental health of European Union citizens living in Scotland. Thirty EU citizens took part in seven focus groups. Participants reported three main sources of acculturative stress: uncertainty, feelings of rejection and experiences of loss. These were associated with a range of negative emotional and mental states including anxiety, anger, shock and sadness. A minority reported severe difficulties including trauma, panic attacks and deterioration of existing physical and mental health conditions. Participants mobilised contrasts between Scotland and other parts of the United Kingdom to partially mitigate feelings of rejection. These findings indicate that the United Kingdom's hostile acculturative context has had important, enduring effects on the mental health of EU citizens in Scotland.

KEYWORDS

acculturative stress, Brexit, integration, mental health, Scotland, stigma

1 | INTRODUCTION

Migration has important implications for mental health (Bhugra, 2004; Close et al., 2016; Kirmayer et al., 2011), understood in this paper to comprise 'a state of well-being in which every individual realizes his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and can contribute to her or his community' (World Health Organisation, 2014). Taking a qualitative approach, the current study examines how Brexit was experienced by EU citizens in Scotland, with a focus on their mental health.

1.1 | Acculturative stress, stigma and mental health

Widely understood to be predominantly a vote on immigration (Guma & Dafydd Jones, 2019; Tyrrell et al., 2019), Brexit signalled and was

associated with anti-immigration rhetoric and ideology, conveyed in political discourse and the media (Burnett, 2017; Goodman, 2017; Heald et al., 2018). It was also accompanied by a surge of racist abuse, marking increasingly negative attitudes towards EU migrants among some voters (Heald et al., 2018; Home Office, 2016). Thus, we understand Brexit as a process rather than a single event, comprising not only the referendum result itself but also the 'leave' campaign, associated political and media discourse, and the protracted subsequent political process regarding when, on what terms, and even whether the United Kingdom would leave (McCullum, 2020). In this section, we draw on theories of acculturation and stigma to explain why Brexit is likely to have harmed the mental health of EU citizens living in the United Kingdom.

According to Berry's acculturation theory, migrants experience acculturative stress when they appraise an intercultural experience (such as interacting with members of the host society) as a source of

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difficulty which they cannot easily resolve (Berry, 2006, 2009). A migrant may experience acculturative stress for various reasons, one of which is the way in which they are treated by the host population (Berry, 2009; Berry et al., 1987). Acculturative stress is more likely to occur when the host society's ideological stance is critical of pluralism and diversity and/or when members of the host society hold negative attitudes towards the immigrant group (Berry, 2009). In other words, a hostile acculturative context increases the likelihood that a migrant's acculturation experiences will be stressful. Berry (2009) focuses on changes experienced by the migrant as a direct result of the act of migration. However, we suggest that when an acculturative context becomes more hostile (as with Brexit in the United Kingdom), acculturative stress among those who have already migrated may also increase.

To understand more precisely why a hostile acculturative context should increase migrants' stress, we turn to research and theorising on stigma. Hatzenbuehler (2016) defines structural stigma as 'societal-level conditions, cultural norms, and institutional policies that constrain the opportunities, resources, and well-being of the stigmatized' (p. 742). Characterised by increased hostility to EU citizens in both policy and public opinion, Brexit clearly fits Hatzenbuehler's (2016) definition of structural stigma (Frost, 2020). Stigmatisation of a given group at the societal level triggers stress responses of various forms among group members (Hatzenbuehler, 2016). These include experiences of discrimination, expectations of rejection by others, attempts to conceal one's stigmatised identity, and internalisation of the stigma (Meyer, 2003). All of these stress responses have been found to occur among members of stigmatised groups (Hatzenbuehler, 2016; Meyer, 2003; Pachankis, 2007). There is also evidence that stigma-based stress responses impair mental health (Hatzenbuehler, Nolen-Hoeksema, & Dovidio, 2009; Schmitt et al., 2014) although understanding of the mechanisms involved is limited (Meyer, 2003).

Given that Brexit represents a hostile shift in the acculturative context of the United Kingdom, with increased structural stigmatisation of its EU citizens, one might expect negative implications for their stress and mental health. Below, we show that although little research has focused explicitly on mental health, there is evidence that Brexit has adversely affected EU citizens in the United Kingdom.

1.2 | EU citizens in the United Kingdom: Pre- and post-Brexit

By the time of the referendum in 2016, over three million EU citizens lived in the United Kingdom (Office for National Statistics, 2019), which has been an EU member since 1973. One of the core principles of the EU, the free movement of persons, allows EU citizens to move freely and reside in other member states without any visa requirements and to exercise the same rights (e.g., employment and benefits) as citizens of the host country. A recent systematic review (Teodorowski et al., 2020) reported found that prior to Brexit, many EU citizens experienced difficulties, including poor employment conditions or pay (e.g., Christensen & Manthorpe, 2016), social isolation

(e.g., O'Brien & Tribe, 2014) and language barriers (e.g., Farr et al., 2018). As the referendum approached, many also directly experienced or were aware of increasing anti-migrant rhetoric and abuse towards EU citizens, particularly Eastern Europeans (Rzepnikowska, 2019). Even so, the referendum result came as a shock to many (Guma & Dafydd Jones, 2019; Luthra, 2020; Rzepnikowska, 2019).

Most EU citizens in the United Kingdom appraised Brexit negatively (Luthra, 2020; McCarthy, 2019; Sredanovic, 2020). Three main forms of stress are particularly evident in the literature. Firstly, EU citizens reported extensive uncertainty regarding their future rights and lives in the United Kingdom (Guma & Dafydd Jones, 2019), which were not always assuaged by the meeting of bureaucratic requirements (Botterill et al., 2020). Many questioned whether to remain in the United Kingdom (Sime, 2020), and some felt betrayed by the UK government for failing to protect and reassure EU citizens about their future (Duda-Mikulin, 2019). This uncertainty appears to be partly a result of the protracted negotiating period following the referendum (Sredanovic, 2020), and of the uncharted territory in which EU citizens' new 'settled status' unfolds (Botterill et al., 2020).

Secondly, there was a rise in discrimination and abuse (Home Office, 2016; Rzepnikowska, 2019), although EU citizens did not always report incidents (Sime, 2020). Some sensed that previously covert racism became more open, legitimised by the referendum result (Benedi Lahuerta & Iusmen, 2020; Guma & Dafydd Jones, 2019; Sime, 2020). Thirdly, some EU citizens reported feelings of rejection, a reduced sense of belonging (Ranta & Nancheva, 2019; Tyrrell et al., 2019), and increased self-consciousness about speaking in their native tongue in public (Benedi Lahuerta & Iusmen, 2020).

Existing evidence suggests, then, that Brexit has created or exacerbated several stressors for EU citizens in the United Kingdom. Two of these (experiences of discrimination and expectations of rejection) are forms of stress which often follow from stigmatisation (Hatzenbuehler, 2016; Meyer, 2003). Furthermore, a recent study demonstrates that at least one of these stressors is impacting mental health. Frost (2020) measured perceived discrimination and generalised anxiety disorder (GAD) symptoms among migrants in the United Kingdom at three time points in 2017, the year after the referendum. He found that increases in experiences of discrimination from one time point to the next were associated with increases in GAD symptoms over the same period, suggesting that experiences of discrimination may lead to increased generalised anxiety.

Frost (2020) also found that the amount of discrimination migrants experienced was associated with the percentage of their local population who voted to leave the EU. He thus demonstrated that the stress experienced by the individual was linked to local levels of structural stigma (signalled by local voting patterns). This finding supports Botterill et al.'s (2019) argument that experiences of Brexit are not uniform across the United Kingdom but are informed by diverse histories and geographies. In the next section, we argue that the geographical contrast between Scotland and the rest of the United Kingdom is particularly significant for EU citizens' experience of Brexit.

1.3 | The acculturative context of Scotland

Over 200,000 EU citizens reside in Scotland, representing 4.3% of the population (Lessard-Phillips, 2019). Since 2004, when 10 new states joined the EU, Scotland experienced a large influx of newcomers with its migrant population trebling by 2018 (SPICE, 2019). The largest migrant group is Polish (around 87,000), but there are substantial numbers hailing from many other EU countries including Ireland, Lithuania, Italy and France (SPICE, 2019).

Most research investigating EU citizens' experiences of Brexit has mainly or exclusively recruited participants living in England (e.g., Lulle et al., 2019; Rzepnikowska, 2019), and those studies that have recruited across the four countries that make up the United Kingdom have not differentiated between them in their analysis (e.g., McCarthy, 2019; McGhee et al., 2017). However, the acculturative context is not uniform across the United Kingdom. In particular, Scotland, which is part of the United Kingdom but has a devolved government and parliament, differs in important ways from England, Wales and Northern Ireland. Firstly, and most strikingly, there was a clear 'remain' majority in Scotland nationally and in every Scottish council (Electoral Commission, 2019). Secondly (and relatedly), public attitudes to immigration are more positive in Scotland than in England (McCullum et al., 2014). Thirdly, since the referendum, the Scottish Government has pursued pro-immigration campaigns, sending welcoming messages to EU citizens, thus driving an ideology and agenda that is more multicultural than that promoted by the UK government (Botterill & Hancock, 2019; Scottish Government, 2018).

It is important not to paint too rosy a picture, however. A significant proportion of the Scottish population holds negative attitudes towards immigration (McCullum et al., 2014), the majority supports reducing immigration levels (Trevena, 2018) and racism still exists (Botterill & Hancock, 2019; Police Scotland, 2018). Nevertheless, we suggest that Scotland's acculturative context is likely to be less hostile to EU citizens than that offered by England, Wales and Northern Ireland (Botterill & Hancock, 2019). In other words, there is likely to be less structural stigma towards EU citizens in Scotland than elsewhere in the United Kingdom, and stigma-based stress resulting from Brexit might be mitigated in this setting. A small body of evidence is suggestive on this point. In interviews with 10 Polish nationals living in Edinburgh, Botterill and Hancock (2019) uncovered the same themes of uncertainty, hostility, rejection and difference articulated by EU citizens living in England (e.g., Rzepnikowska, 2019) and Wales (Guma & Dafydd Jones, 2019). However, some participants did orient positively to the 'special' acculturative context of Scotland, for instance commenting, 'I feel that it would be more difficult to establish a deeper relationship with an English person than with a Scottish person. I dunno, I felt more at home in Scotland ... I'm sort of idealizing Scotland, for some reason. Mostly because of this Brexit thing and the outcome of it' (Botterill & Hancock, 2019, p. 7). Likewise, in interviews and focus groups, several EU citizens living in Glasgow portrayed Scotland as more welcoming than England (Gawlewicz, 2020). Along with Frost's finding that perceived discrimination was related to local voting patterns, these qualitative studies suggest that the

acculturative context of Scotland might mitigate stigma-based stress for its EU citizens.

The current qualitative study addresses two aims. Firstly, theories of acculturative stress and structural stigma predict that Brexit would harm EU citizens' mental health (Berry, 2006, 2009; Hatzenbuehler, 2016). Although other qualitative studies refer to mental health problems, including anxiety (e.g., Pietka-Nykaza & McGhee, 2020; Rzepnikowska, 2019) and panic attacks (Trąbka & Pustulka, 2020), as yet, none have examined this issue specifically (Heald et al., 2018). Our first aim was therefore to elicit EU citizens' own accounts of Brexit-related stressors and mental health. Secondly, the study builds on research suggesting that the local acculturative context informs EU citizens' experiences of Brexit (Botterill et al., 2019; Frost, 2020). Thus, our second aim was to examine whether and how participants' accounts of their Brexit experiences are informed by their residence in Scotland, whose acculturative context appears to be less hostile and stigmatising of EU citizens than the United Kingdom as a whole.

2 | METHODS

Thirty EU citizens took part in this study, representing 13 different nationalities from both pre- and post-2004 enlargement of the EU: Polish (9), Spanish (4), Latvian (3), Swedish (3), Greek (2), Irish (2), French, German, Romanian, Bulgarian, Hungarian, Estonian and Italian (1 representative of each). Fourteen participants were professionals, five students, three worked in administrative and secretarial occupations, three in caring and leisure, two in elementary occupations, with one job seeker, one pensioner and one self-employed. Five participants had resided in the United Kingdom for less than 5 years, 12 for 5–9 years, 10 for 10–19 years, two for 20 years or more, with one born in the United Kingdom. Participants' ages ranged from 18 to 61 years. Twenty-three were females and seven males. EU citizens were eligible to participate if they were aged at least 18 years, currently lived in Scotland, already lived in the United Kingdom before the Brexit referendum, and felt affected by the vote. Recruitment was conducted through social media and the established network of the partner organisation.

Focus groups took place in Edinburgh ($n = 6$) and Aberdeen ($n = 1$) during February and March 2019 and were facilitated by two researchers who used a semi-structured topic guide, covering experiences of living in Scotland before the referendum, impact of Brexit on well-being, and sources of support. Spanish (FG5)- and Russian (FG6)-speaking groups were supported by a professional interpreter who received background information about the study in advance and attended briefing and debriefing sessions with the researchers. The first author facilitated one focus group in Polish (FG7). The remaining focus groups were conducted in English (FG 1–4). Focus groups were numbered from 1 to 7 for ease of reference in the analysis.

All focus groups were recorded and transcribed by a professional transcriber. Focus groups are relevant to mental health research because they allow participants to discuss their perspectives in depth

and to share their personal experiences (Badu et al., 2019). However, marginalised groups can feel shy to talk about their personal experiences in a larger group (Badu et al., 2019). Generally, our participants appeared comfortable about sharing often intimate and psychologically difficult stories, although these were more prevalent in some focus groups than others. It may be that participants only approached us to participate if they were willing to share their experiences. Some appeared to value the opportunity to exchange experiences with fellow Europeans, and one participant commented that they found the discussion therapeutic. Each participant received a voucher as gratitude for their time.

Data were analysed using inductive thematic analysis (Braun & Clarke, 2006). Each interview was coded independently by two researchers. PT, RW and CK met to identify, review and refine themes, informed by MG. PT and MG are from an ethnic minority background, and both have experience of working with hard-to-reach groups. RW and CK are British. This diversity of identities allowed the research team to cover both insider and outsider perspectives on participants' experiences.

The Ethics Committee of the School of Nursing, Midwifery and Paramedic Practice at the Robert Gordon University gave ethical approval to the study on 21 January 2019. Oral consent was obtained from all participants. If participants felt distressed, they were offered an opportunity to speak to a trained counsellor immediately after the focus group discussion—two participants requested that meeting.

3 | FINDINGS

We constructed three themes, each containing subthemes, which illuminate the impact of Brexit on the mental health of participants: future unravelled, rejection and change through loss. Each theme appeared in every focus group, suggesting that to some extent at least, they resonated beyond specific national groups. We describe these themes and subthemes in detail below, drawing out their implications for mental health.

3.1 | Future unravelled

Participants expressed pervasive uncertainty, which undermined their ability to plan for and work towards their future. For some, the focus of this uncertainty was the outcome of the Brexit process itself. Although focus groups took place 2 years after the referendum, the United Kingdom parliament was still debating the ratification of the Withdrawal Agreement with the EU, despite the imminence of the withdrawal date (which was later postponed). Participants expressed uncertainty about various aspects of Brexit, including the outcome of political negotiations, 'settled status' (the new [at the time] online registration system for EU citizens), and the implications of political and bureaucratic processes for their rights. These uncertainties led participants to profound questions about what to do and whether to stay in

the United Kingdom. There was a pervasive sense of one's life and plans being 'on hold':

I haven't applied [for settled status], just waiting, I feel like in limbo. (P1, FG1)

On the other side, in my case, I feel like if I leave the UK now, it will be like a final decision and it's a huge responsibility because I'm not sure if I would be allowed to move back because there was no clear information on that. (P5, FG3)

Consequently, some participants had to postpone making life decisions, including starting a family, getting a mortgage or accepting new employment opportunities:

I was offered to be a co-founder [of a company], which would mean I would own half and, you know, dedicate two, three, four years of my life into building it up and we already had clients and we were about to hire some people and then basically the image of a house on a cliff, do you renovate, do you renovate a bathroom in a house on a cliff that can fall off that cliff any minute? I wouldn't renovate that bathroom, like, you know, I'm not going to invest anything, like, setting my roots here even deeper. (P2, FG3)

I don't even think of staying in the country but for example I am not from Scotland, my fiancée is not from Scotland and we have to postpone some life decisions to see what is going to happen after Brexit, what kind of requirements we will have to meet. What is going to be our legal situation regarding our right to remain or may be if we should [move] somewhere else to live but we are in this age it influences our feeling of security and not only the political security of the country. (P3, FG7)

For the participant just quoted, Brexit-induced uncertainty had implications for feelings of security. Several participants spontaneously made explicit links between their experiences of uncertainty and their mental health, with the most common references made to worry (five focus groups), feeling scared or fearful (five focus groups), and anxiety (three focus groups), as illustrated by the following extracts:

[So did anything change after the Brexit vote really?] "Uncertainty. At the moment, I do feel that I don't know what's going to happen and all the discussions and negotiations in regard to Brexit just made me feel anxious because it would be better if there would be some certainty in place." (P1, FG6)

I really loved this country and then this changed and I think now there is a crisis here (...) everything has collapsed and we are forty days before the final date and no one knows anything. (...) you hear the news over and over (...) Everyone is anxious now and the news makes it even worse, because I can hear [about Brexit] all day again and again. (P5, FG2)

I was getting quite worried about what's going to happen, you know, can I get chucked out? I've lived here for over ten years but, what's going to happen because, it's just [my daughter] and I who are Swedish citizens in our family, the other three are British and I was, like, what's going to happen, are they going to, I don't think they would, you know, ship us over to Sweden and then split up the family but it's still, I don't know. (P4, FG1)

The regularity with which participants linked uncertainty to anxiety and related terms was striking. References to other negative mental states, such as sadness or anger, rarely appeared within this theme, suggesting that Brexit uncertainty may affect mental health primarily by increasing levels of anxiety about the future.

3.2 | Rejection

Our second theme captures participants' experiences of the referendum and associated discourses as an act of rejection by the British people. This was painful because many had felt themselves to belong in Scotland. Some participants referred to a diminished sense of home or belonging:

So, essentially, my entire adult life I have spent in the UK and Scotland and this is home, it upsets me whenever anyone asks me, "so, where's home?" And I'm like Edinburgh but, I have to say with the emotional kind of toll this has taken on me, if I had anywhere to go I would but, I don't feel like I have anywhere else to go, this is home. Latvia's no longer home. (P1, FG3)

I'm 12 years here, I felt I belong here but now, I actually don't. (P1, FG4)

Some participants experienced rejection as discrimination, typically in the form of verbal abuse, which were sometimes passed off as humorous but nevertheless experienced as hurtful. Here, two participants report comments encouraging them to leave the United Kingdom:

I live in a retirement home, I'm the youngest there, and even if people don't mean to be nasty (...) a few weeks ago they said to me, "oh, you're going to go home

now" and I thought, you know, I've been in the UK for so many years. (P2, FG2)

I was a tour guide for a while in Scotland [after the referendum], I used to get a lot of comments [from English tourists] to the extent of, "oh, you're Romanian, why are you doing this, you're not Scottish, we want an authentic tour guide", or something like that, you know, "go back to your country" (P2, FG5)

Not all participants reported direct experiences of discrimination. However, many felt that the referendum result had legitimated discrimination, and the majority knew of others having such experiences even if they had not themselves. Consequently, many saw the host population as less open and welcoming than they had previously thought. This affected the way in which some appraised everyday interactions, as in the following extract:

I personally did not experience any attack or unpleasant comment but my perception of people around me changed and I question them all the time, for example, if someone doesn't smile to me in the queue when I order coffee then I always wonder if it is because I speak with foreign accent, if this is because they don't want me here. In the past there was no thoughts like these in my head. The same, my boyfriend (...) is from England, North East where a lot of people voted for Brexit and when we travel to him in the train, when people pick up and read Daily Mail with titles around migration, I just feel afraid to open my mouth [laughs]. I only tell him to his ears different things. So my well-being, my suspiciousness got worse. (P1, FG7)

This participant's newfound suspiciousness can be understood as a reappraisal of everyday events, formerly considered benign, but following Brexit, experienced as potentially hostile and thus, as sources of acculturative stress. She was one of several participants to articulate the expectation of rejection by British people and concealment of her Polish identity ('I just feel afraid to open my mouth'), both of which are common stress responses to stigma (Meyer, 2003). Her efforts at concealment appear to be geographically specific, occurring in 'England, North East'. Her explanation that this is 'where a lot of people voted for Brexit' echoes Frost's (2020) operationalization of structural stigma as the size of the Leave vote. Thus, she articulates a direct connection between local structural stigma and her own stress response of concealment.

The significance of the local context was noted by several other participants whose experiences of rejection appeared to be mitigated by the Scottish context. Participants in almost all focus groups commented approvingly on the letter they received, shortly after the referendum, from Scotland's First Minister, which reassured them that they were 'welcome', 'wanted' and 'needed' in Scotland. Several participants contrasted Scotland favourably with other parts of the

United Kingdom, typically based on the majority 'remain' vote in Scotland, as in these examples:

I've been living in the UK for four years in total now, two years in England and two years in Scotland. So, when I moved to Scotland it was just straight away after the referendum and, I was really glad because the majority of Scotland voted to remain, so I felt safe here and really welcomed. (P6, FG3)

Researcher: You mentioned emotional support, can you tell me more about this?

P4: Emotional support as in, like, when people just put at their houses, or in their window, which I have some neighbours, we don't think you're immigrant, or things like that, or, we don't think you are not welcomed. Emotional support as in, like, you are welcome here, we, we like you here, it's not, or, people at work just telling you, look, we don't mind about the Brexit, we want you here and we'll make things easy for you and that kind of support, which I find in Scotland it is quite common so, in that sense, I'm lucky. I don't even imagine how it would for someone in England.

P3: Pretty horrible.

P4: Yeah, people maybe in smaller places, I think Wales was one of the highest rates with Brexiters so that must feel a bit awkward to be in there and feel like most of your neighbours or most of your environment they don't want you there (...) (FG2).

In these extracts, participants constructed England and Wales as 'others' to Scotland's uniquely favourable acculturative context. They too focused on the size of the 'leave' vote as a reflection of local hostility. In addition, some participants understood the 'remain' majority in Scotland to mean that they and the Scottish people were both unwilling victims of the referendum result. This promoted a sense of identity and unity with the (Scottish) host population. 'I felt these Scots felt in solidarity with the rest of EU citizens because they really finished in a similar situation because they also as the majority didn't want to leave EU either', commented one (P3, FG7). A similar sense of unity with Scottish people was conveyed in another focus group:

P4: (...) there is a lot of British people, especially here in Scotland, I think, that are completely against it as well. I think most people that I know are against it.

P3: Yeah, honestly, moving forward, I feel like the best option for Scotland is a second referendum to leave the UK, in my opinion...

P4: Yeah, yeah.

P3: ...because the majority in Scotland was to stay in the EU so why should we have to be dragged out with...

P4: I know. (FG1)

In this extract, participants construed EU citizens and Scottish people as similar, epitomised by participant 3's use of the term 'we' to refer to both groups. There is, then, evidence that EU citizens' sense of belonging was somewhat protected by the Scottish context, which was compared favourably with the hostility perceived elsewhere in the United Kingdom—an imagining that was closely based on referendum voting patterns. Nevertheless, some participants felt that many Scottish people were also anti-immigration, and others emphasised that despite the Remain majority, 'it was still 40% of the Scottish population wanted them to leave' (P3, FG4). Moreover, experiences of rejection were frequently articulated in focus groups, so the Scottish context appeared to soften the impact of Brexit in this regard, rather than eliminating it altogether.

Another form of rejection articulated by participants was a sense that they were disenfranchised from events that held enormous significance for them. EU citizens, except those from the Republic of Ireland, were not allowed to vote in the referendum nor to vote in UK general elections, thus leaving them without democratic influence on the future relationship between the United Kingdom and the EU. Their exclusion from the decision-making process was particularly acute since many were able to vote in the Scottish Independence vote in 2014. Some felt ignored, alienated or patronised by the voices that claimed to speak for them:

I feel that no one really cares about people in our position and we cannot do anything about it, and we are just going to let other people rule our lives at the moment we have to just accommodate ourselves to them. (P3, FG6)

In addition to a sense of disempowerment, several participants articulated a heightened sense of their migrant identity following Brexit, as in the following examples.

I have the same thing about people saying stuff about immigrants and me going, well, I'm immigrant and them going, we don't mean you, you're, you're a good type of immigrant. (P1, FG3)

(...) all of a sudden having that energy around you and you could clearly feel it, like, that people would question your contribution, you know, who are you to live here, what have you contributed and I actually caught myself many times being in taxis or running workshops, or, kind of justifying my existence, you know, all of a sudden you have to say, oh, you're actually, oh, I work at the university, you know, I teach your people how to think, so, er, I should stay here, you know. I just feel like I have this narrative to defend myself' (P3, FG3)

These participants demonstrated an awareness that the category of 'immigrant' is prone to stigmatisation. This led some to attempt to

'prove themselves' as good and thus worthy of living in the United Kingdom.

Unlike the 'future unravelled' theme, a wide range of terms for emotional states and mental health accompanied the 'rejection' theme. Feelings of exclusion were expressed in five focus groups, with participants commenting that they felt unwelcome, left out, excluded, without a say, different, isolated and alienated. Four focus groups mentioned terms linked to anxiety, including feeling fear, being worried, afraid or scared, as well as the term anxiety itself. Four used terms that appear to be anger-based, including 'frustrating', 'angry', 'offended', 'annoyed' and 'irritated'. A range of other responses were less common, including feelings of sadness and discomfort.

3.3 | Change through loss

Our third theme concerns the way in which participants understood Brexit as a change to their lives and to their perceptions of the United Kingdom. This began with the shock that many experienced at the referendum result, with several participants vividly recalling strong immediate emotional reactions to the news:

I was expecting different results. Until the last moment I could not believe it would happen so, I was travelling actually home [to the UK], (...), in the morning I was in the airport the results [came in] and I was quite shocked. (P1, FG6)

My initial reaction was very angry actually, I lived the day very angry and on top of that my girlfriend at the moment wanted not to remain (in Scotland) so, I was so angry but after a few days, well, after a week, I think I kind of cooled down. (P3, FG5)

Beyond their initial reactions of shock and anger, several participants understood Brexit as a loss, particularly of their belief that the United Kingdom was a welcoming place, and a few reported experiences of grieving in response:

I used to believe people were very welcoming and friendly and smiling, all of that. Whereas, lately, I don't feel this is the case as much anymore. (P1, FG1)

I want to mention that Brexit created [for] the first time in my life the feeling of a real mourning. (P1, FG7)

A minority of our participants experienced Brexit as extremely difficult, as in the following examples.

[W]hen you think about it, say you are victim of (...), you get shot at work, then you wouldn't go to see a

movie where they shoot people but, there is no way that I can be in a safe space, there is no street, there is no phone conversation, there is no bus I can be on and not still hear that dreaded word, Brexit. (P2, FG3)

[I]t's like a traumatic experience (...), if I get more time to heal, I re-experience it every time. (P3, FG3)

A key challenge for these participants was Brexit's pervasive reach into everyday life, which made the topic literally inescapable. Furthermore, those who had pre-existing mental health conditions spoke of how Brexit exacerbated them:

I was diagnosed with a mental health issues when I was at university already, so there's deep rooted issues there, I have been working on that for years but, Brexit did take me backwards a little bit, but I have learned how to cope with my stress a little bit better, but, I did have a number of panic attacks shortly after the Brexit and, I have not been able to sleep, I don't sleep very well at all. (P1, FG3)

It was clear that for these participants, Brexit was a source of considerable, recurring stress in their everyday lives, to the detriment of their mental health. A range of emotions and mental state terms were mentioned in association with this theme. The most common was shock (five focus groups), but expressions of sadness, such as 'upset', 'heartbroken' and 'crying', were also quite common (four focus groups). A range of other negative mental states were referenced less often, including tension, discomfort, stress and anger. The strongest expressions of distress tended to accompany this theme, with terms such as 'panic attacks', 'depression', 'trauma', 'denial', 'mourning' and 'paranoia'.

EU citizens spoke about the limited availability of support structures for them to cope with Brexit and its impact. Some workplaces were seen as a good source of support, depending on the size and attitude of the employer and the resources they could provide access to. Other sources of support mentioned included fellow EU citizens, lawyers, social media, ethnic minority charities, religious bodies and campaign organisations. Information and support provided in their mother tongue were seen as beneficial especially for those with limited English language skills. Some reported accessing support through the National Health Service and requiring medication to improve their mental health and help them cope.

A coping strategy which appeared in the dataset was to focus on the 'remain' vote to soften the blow of Brexit. For instance, one participant noted that 'you feel a bit rejected, you don't, like, you try to think that vote was not everyone obviously' (P4, FG2). We saw above that several participants used a contrast between Scotland and the rest of the United Kingdom to understand their local context as relatively welcoming. This might also be understood as a coping strategy.

4 | DISCUSSION

Heralding increasingly anti-immigration ideology and attitudes (Burnett, 2017; Goodman, 2017; Heald et al., 2018; Home Office, 2016), Brexit represented an important change in the acculturative context of the United Kingdom, marking an increase in structural stigma towards its EU citizens (Frost, 2020). Although our study does not necessarily represent typical experiences, it demonstrates some of the ways in which this change is impacting the mental health of EU citizens in Scotland. Our findings suggest that acculturative stress follows not only from the initial act of migration but can also be triggered by unfavourable changes in the host country, even after successful acculturation. This is in keeping with Berry's (2006) view that acculturation is not stage like but can fluctuate depending on the problems migrants face, their resources and opportunities, all of which are subject to change.

The *future unravelled* theme captured the uncertainty experienced by participants, about both the outcome of the Brexit process, and whether they should leave the United Kingdom. These uncertainties have been noted in several previous studies, as has the 'wait and see', 'life on hold' attitude expressed by some of our participants (Guma & Dafydd Jones, 2019; Lulle et al., 2019; McCarthy, 2019; Trąbka & Pustulka, 2020). The main impact that this chronic uncertainty had on participants' mental health was a self-reported increase in anxiety. The prevalence of references to uncertainty and anxiety in our data is noteworthy because focus groups took place more than 2 years after the referendum, whereas most other studies documenting this response focused on the early post-referendum period. Botterill et al. (2019) speculate that uncertainty was a feature primarily of this early phase. The current study suggests, rather, that uncertainty and accompanying anxiety have been enduring experiences for some EU citizens. We might expect such chronic exposure to uncertainty to be particularly harmful to well-being, especially when it concerns key aspects of life, such as family unity, relationship planning and career.

Our second theme encompassed participants' feelings of *rejection* by various aspects of Brexit, including the result itself, media and political discourses, and experiences of discrimination, a finding in keeping with other studies (Guma & Dafydd Jones, 2019; Ranta & Nancheva, 2019). We suggest that this theme represents participants' encounters with structural stigma, which increased with Brexit (Frost, 2020; Hatzenbuehler, 2016). Some participants reported expecting that others would reject them and hiding their identity in public spaces (by not speaking their native tongue or even not speaking at all). There is evidence from other stigmatised groups that these are both stress responses to stigma (Meyer, 2003). Some participants were clearly aware that their immigrant status was stigmatised and referred to a felt need to demonstrate their worth. We suggest that this may also be a stress response. Implications for emotional state and mental health appeared to be broader than for the 'future unravelled' theme, with the majority of focus groups referencing feelings related to exclusion, anxiety and anger.

Our *loss through change* theme incorporated the process of coming to terms with the referendum result. As found in previous research

(Botterill & Hancock, 2019; Rzepnikowska, 2019), most participants in this study had perceived Scotland and the United Kingdom as a largely welcoming place where they could settle and were shocked and (in some cases) angered by the result. Beyond this initial reaction, some participants articulated a sense of loss and grief, responses to Brexit that have not previously been noted in the literature. The most salient emotional and mental states associated with this theme were shock and sadness. Significantly, a minority of participants reported a substantial reduction in their well-being following Brexit, with mention of trauma, panic attacks and difficulties sleeping. Their accounts suggest that the acculturative stress resulting from Brexit can have a serious impact on mental health and can exacerbate existing conditions.

We found that the Scottish acculturative context mitigated the harmful effects of Brexit, largely by reducing feelings of rejection. Like Botterill and Hancock's (2019) and Gawlewicz's (2020) interviewees, participants mobilised pro-EU messages from the Scottish Government, and the 'remain' majority vote across Scotland, to differentiate Scotland from the rest of the United Kingdom, and to make a case that they were welcome in Scotland. Some drew on the Remain majority in Scotland to identify with the host population (of Scotland, not the United Kingdom), as similarly disadvantaged and disenfranchised by Brexit. The understanding of Scotland as distinct from the rest of the United Kingdom appeared to soften (but not eliminate) the blow of the rejection messages so widely experienced by EU citizens in Britain (Guma & Dafydd Jones, 2019; Ranta & Nancheva, 2019).

However, being in Scotland appeared not to protect against uncertainty or loss. EU citizens in Scotland are bound by the same bureaucratic and legal requirements as their counterparts elsewhere in the United Kingdom and thus just as vulnerable to uncertainties surrounding these. It follows that residence in Scotland would not protect participants from anxiety resulting from these uncertainties. Likewise, despite its 'remain' majority, Scotland is bound to leave the EU along with the rest of the United Kingdom, and so it is understandable that feelings of loss remained.

4.1 | Practice implications

Protracted uncertainty has been a major source of acculturative stress for EU citizens following Brexit. Participants expressed their need for clear information about their status and how to secure it to be available in their mother tongue (see Weishaar, 2010), as many were unclear who to turn to for such information. At the time of the research, information about the settled status scheme and its operation were considered particularly important, to secure residence in the United Kingdom. However, evidence from similar schemes shows that not everyone will register (Clay et al., 2019) and the most vulnerable are typically left behind (Drozdowicz, 2019). Those who are dependent on welfare may have particular difficulties in navigating the complexities around Brexit and the British welfare system (Migration Observatory, 2018). After this study was conducted, both the Scottish

and UK governments supported organisations to assist EU citizens in the registration process. Since our study, the Scottish Government (2019) has provided financial support to the Citizens Advice Bureau and two new charities: the Citizens' Rights Project and Settled in Scotland, to provide advice and encourage EU citizens to register for settled status. Such support is likely to be important for those not employed by large or multinational companies or attending educational institutions.

Feelings of rejection and loss were also important sources of acculturative stress, indicating the need for about a range of support through NHS, third sector and community organisations to meet individual needs. Superdiversity of the migrant and ethnic minority population in the United Kingdom already creates challenges for healthcare professionals as it can be impossible to fit everyone into existing services thus risking their exclusion (Phillimore, 2011). Furthermore, any Brexit outcome (deal or no deal) is predicted to have a negative effect on United Kingdom's leadership and governance of health (Fahy et al., 2019). Thus, we suggest that support be offered not only via the National Health Service but also within community organisations, including one-to-one support and group projects promoting community cohesion (Trevena, 2019), ideally from the host community's initiative. Such organisations will require financial support, however, to provide meaningful help.

4.2 | Limitations

This qualitative study has illuminated elements of the lived experiences of EU citizens in Scotland due to Brexit. These findings cannot be generalised to all EU citizens living in Scotland, and given participants represented diverse nationalities, it is not possible to identify patterns based on country of origin. Most participants lived in Scottish cities with substantial migrant populations, and their views may differ from those living in less diverse areas. The study captured a point of time (before the first Brexit deadline of March 2019); further studies should explore how EU citizens' experiences and perceptions developed over the protracted and uncertain nature of the subsequent political process. As in several other studies (McCarthy, 2019; Sredanovic, 2020; Trąbka & Pustulka, 2020), most of our participants were female. On the basis of existing analyses of EU citizens' post-Brexit experiences (e.g., McGhee et al., 2017; Ranta & Nancheva, 2019; Trąbka & Pustulka, 2020), we suspect that this gender imbalance did not substantially influence our findings. Nevertheless, future studies should include more male participants.

5 | CONCLUSIONS

Brexit represents a hostile change to the acculturative context of the United Kingdom, marking an increase in structural stigma towards EU citizens, with likely implications for their stress and mental health (Berry, 2009; Frost, 2020; Hatzenbuehler, 2016). Two types of acculturative stress were particularly pervasive in our data. Firstly,

uncertainty, about the outcome of Brexit and its implications, was widespread. Secondly, participants reported feeling rejected. These feelings followed from the referendum result, political and media discourse, and from experiences of discrimination, all of which can be understood as aspects of structural stigma (Frost, 2020; Hatzenbuehler, 2016). Some participants reported expectations of rejection, and concealment of their European identity, which are well-documented stress responses to stigma (Meyer, 2003). Within our third theme of loss, a subset of participants reported substantial impacts on their well-being, including panic attacks, difficulties sleeping and the exacerbation of existing mental illness. The research took place more than 2.5 years after the referendum, suggesting that Brexit is having an enduring effect on EU citizens in the United Kingdom.

To our knowledge and at the time of writing this is the first study to explore EU citizens' mental health using qualitative data. Although participants mentioned a wide range of negative emotional and mental states, we found that these were linked to particular aspects of their Brexit experience. Thus, uncertainty was particularly associated with anxiety; rejection with feelings of exclusion, anxiety, and anger; and loss with shock and sadness. Frost (2020) suggested that anxiety is the most significant mental health outcome of Brexit. Our study supports this argument with respect to uncertainty but suggests that Brexit affects several other aspects of EU citizens' mental health as well.

Our study adds to a small body of evidence that Scotland's acculturative context is mobilised by EU citizens in ways that increase their feelings of belonging (Botterill & Hancock, 2019; Gawlewicz, 2020). This is further evidence that geographic specificity informs EU citizens' experiences of Brexit (Botterill et al., 2019). Still, extensive uncertainty and feelings of rejection remained, indicating a clear need for support from policymakers, healthcare professionals and community groups.

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DATA AVAILABILITY STATEMENT

Data sharing is not applicable

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