INTRODUCTION TO THE ULYSSES SYNDROME

Migrants live a very particular reality, and their problems do not resemble those of other persons who have never left their place of origin. It is for this reason that the mental health issues of migrants must be addressed from another point of view. The ‘Ulysses Syndrome’ is the migrant syndrome of chronic and multiple stress. In other words, it is what migrants experience when their problems multiply and are long lasting. This syndrome was described by Dr. Joseba Achotegui, who has worked for many years with migrants in Spain. As Dr. Achotegui explains, we talk about the Ulysses Syndrome when conditions are so hard that there is no way to overcome them and the person enters a situation of permanent crisis.

The difficulties which psychologically affect most migrants are:

• Forced separation from loved ones
• Lack of opportunities: no documents, difficulties finding work or needing to work under difficult and/or risky conditions, or subjected to exploitation
• The struggle to survive: where to eat, where to sleep
• The fear, the terror: dangerous situations experienced during the journey, fear of being detained or deported, physical abuse, sexual abuse, or feeling helpless

But, in addition, those difficulties (called stressors) can worsen when:

• They multiply: one problem follows another and the cycle becomes endless. As the saying goes: ‘When it rains, it pours’.
• Duration: when extreme situations affect the migrant for months, or even years.

A person’s mental health has different levels. To understand them better, let us imagine a thermometer which, instead of measuring the body temperature, would measure mental health temperature. The thermometer could indicate from ‘without fever’, in this case ‘Balanced Emotional Status’ to ‘Very high fever’, i.e. ‘Mental Health Crisis’, as showing the following graph:

Identifying this situation or experience with the term “Ulysses Syndrome” allows for a better diagnosis to the migrant’s own problems, and at the same time, prevents the migrants from becoming victims of:

• Marginalization or dismissal of their suffering. That is to say that they are told that they have nothing even though they present up to ten symptoms;
• Incorrect diagnosis, often as depressive patients. If a person suffers from depression, (s)he has difficulty even getting out of bed. However, migrants with Ulysses Syndrome, regardless of whether they are sad or bitter, will get up and prepare themselves for work if they have been told that they have a job. They are also given other incorrect diagnosis such as post-traumatic stress disorder (PTSD), when in fact it is not what they are experiencing. In many cases, these incorrect diagnosis lead to unnecessary medicalization.

Metaphorically, the Ulysses Syndrome can be thought of as the experience of being in a room where the temperature has been raised to 100°C. We would experience vertigo, camps, but... would we be sick because we present those symptoms? Of course not. As soon as we would go out in the open air, those symptoms would disappear because they had only appeared in the first place as a response of our body to the extreme conditions that we were not able to adapt.
But if someone in the room has a heart attack, this person would be sick (in our metaphor, it would be a depression, a psychosis, ...). Thus, the Ulysses Syndrome is found in the area of preventive health care and psychosocial sphere, rather than in the treatment area. The intervention must be more of the educational type and emotional support. For this reason, the Ulysses Syndrome is of concern not only to psychologists, doctors or psychiatrists, but also to social workers, health educators, and community leaders.

According to Greek mythology, described by Homer, Ulysses was a demi-god, who, nevertheless, painfully survived the terrible adversities and dangers he was subjected to. But today, people who cross borders are just flesh and bones who experience situations that could be considered even more dramatic than those described in the Odyssey. Loneliness, fear, despair, ... the migrations of this new millennium remind us increasingly of Homer’s ancient texts. If a person has to become a ‘nobody’ in order to survive, if (s)he has to remain invisible, with no identity, no self-esteem, no social integration, (s)he will thus never be able to enjoy mental health.

THE MIGRATORY MOURNINGS
From a psychological perspective, migration is considered a life event, which, as any change, brings with it some stress and tension which we call “migratory mourning”. We consider there are 7 mournings in migration, or in other words, 7 causes of stress specific to migration.

1. Family and the loved ones: migrants leave behind what they love and is familiar to them, especially their loved ones like children, partner, parents, family and friends. The uncertainty of not knowing when they will be reunited, or if they will see them again, causes sadness and worry. It is also more difficult for migrants to receive emotional support in difficult moments when they are far away from home.

2. Language: sometimes persons migrate to countries where another language is spoken and if the person does not speak or does not master this language, it will be more difficult to adapt, to find a job and to carry out daily tasks like navigate public transportation, go to the market, or go to the doctor.

3. Culture: each region or country has different values and habits which sometimes enter in conflict with the migrant’s own culture and makes the adaptation more difficult. It is also common that the migrant misses typical thinks from his/her place of origin like music, food, feasts, the noise of the rivers, the colour of the fields, the smell of fresh bread, the music bands from the villages.

4. Homeland: light, colours, smells, landscape, temperature and so forth change from one place to another, and to be far from those familiar places can cause stress. It is even worse if the changes are drastic, for example a person who has always lived in a tropical region and migrates to a place with relentless winters, snow and sub-zero temperatures.

5. Social status: the access or lack of access to some opportunities in the new place such as work, accommodation, health services, social services, the person’s migratory status (to be documented or not), among others, can determine the stress level in which the migrant lives. In the same way, if we talk about a person who, in his/her home place, had a middle or high social status, with a professional job, and is forced to migrate and live in lower socioeconomic conditions and to work at jobs different from his/her profession, it may create more stress.

6. Group belonging: sometimes the migrant faces rejection at the place of arrival for belonging to a different culture or ethnic group, or simply for being migrant. At the same time, the migrant can feel uncomfortable when seeing or feeling him/herself to be different from the others, for not belonging to this group and, at the same time, for missing his/her own people.

7. Physical risk: the migration journey can be long, dangerous, and full of uncertainty, especially when the person migrates without the necessary documents. Migrants can be subject to physical and mental abuse from those who bring them across (smugglers), from authorities, or raiders who abuse the migrants’ vulnerable conditions. Depending on how the person migrates and the migratory route, the migrant can also face other natural dangers like dehydration in the desert, freezing in the mountains, attacks by wild and venomous animals, drowning while crossing rivers and canals, or traveling in precarious or overloaded rafts on seas or oceans.