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PSYCHOSOCIAL HEALTH AND WELLBEING OF MIGRANTS AND IMMIGRANTS IN JAPAN IN THE POST-COVID-19 ERA: A SYSTEMATIC REVIEW

Ikeanyionwu Nnaemeka Cyril*[1], Dr. Stephen Oyegoke Fagbemi[2], Oluwaseyi Mercy Adebayo[3], Oloruntoba Jacinta A.[4], Dr. Ebenyi Hyacinth Okwe[5], Dr. Aderonke Tolulope Fagbemi[6], Bello Olufunmilayo Esther[7], Peter Ayobami Oladokun[8]

[1]Department of Public Health, Federal University of Technology Akure, Nigeria.

[2]Department of Public Health, Federal University of Technology Akure, Nigeria.

[3]Department of Medicine, Obafemi Awolowo University, Nigeria.

[4]Department of Public Health, Federal University of Technology Akure, Nigeria.

[5]Department of Public Health and Disease Control, Ministry of Health, Ebonyi State, Nigeria.

[6]Department of Community Medicine, Faculty of Clinical Sciences, Federal University of Technology Akure, Nigeria.

[7]Department of Public Health, Federal University of Technology Akure, Nigeria.

[8]Department of Public Health, Federal University of Technology Akure, Nigeria.

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***Corresponding Author: Ikeanyionwu Nnaemeka Cyril**

Department of Public Health, Federal University of Technology Akure, Nigeria.

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ABSTRACT

Migrants living outside their countries of origin often experience multiple vulnerabilities, particularly in relation to socioeconomic conditions, social integration, and access to essential services. These challenges were further worsened by the COVID-19 pandemic, which caused severe social disruptions worldwide and affected migrant populations. This systematic review aimed to synthesize current evidence on the barriers to, and facilitators of, mental well-being among migrants and immigrants living in Japan during the post-pandemic period.A comprehensive literature search was conducted on Scopus, PubMed, PsycINFO, and Google

Scholar. Studies published from 2022 onwards that evaluated mental health and well-being of international migrants in Japan were identified and screened according to predefined eligibility criteria. Relevant data on study characteristics, determinants of mental well-being, barriers, facilitators, and policy recommendations were extracted and synthesized through thematic analysis.A total of 12 articles involving 4,622 participants met the inclusion criteria. The most frequently studied migrant populations post-pandemic were Vietnamese migrants (42.6%), followed by Chinese (14.2%), Nepalese (14.2%), Ghanaian (14.2%), and mixed international migrant populations (14.2%). Thematic analysis identified language barriers, female gender, limited social support, financial insecurity, employment-related stress, and difficulties accessing healthcare and social services as the principal barriers to mental well-being. Conversely, strong social networks, preservation of cultural identity, community engagement, social connectedness, and access to support services emerged as important facilitators of positive mental health outcomes. Policy recommendations across the reviewed studies emphasized the need for culturally sensitive mental health services, enhanced migrant support programs, improved language assistance, and greater cross-cultural awareness within Japanese society.The findings showed that social support networks play an important role in shaping the mental well-being of migrants in Japan. The review recommend further longitudinal and intervention-based research to better understand the evolving mental health needs of migrants in post-pandemic Japan.

KEYWORDS: Mental health; Depression; Migrants; Immigrants; Foreigners in Japan; COVID-19; Social support; Well-being.

1.0 INTRODUCTION

Mental health has been recognized as a fundamental component of global health and sustainable development, particularly following the challenges posed by the COVID-19 pandemic. The World Health Organization (WHO) defines mental health as a state of well-being in which individuals realize their abilities, cope effectively with the normal stresses of life, work productively, and contribute meaningfully to their communities (WHO, 2014). Mental well-being extends beyond the absence of mental illness and encompasses emotional, psychological, and social functioning, all of which are essential for individual and societal prosperity (WHO, 2014).The COVID-19 pandemic, officially declared a Public Health Emergency of International Concern on 31 January 2020 disrupted healthcare systems, economies, education, employment, and social interactions across the globe (WHO, 2022). Beyond its direct health consequences, the pandemic caused widespread psychological distress, including increased rates of anxiety, depression, loneliness, stress, and other mental health disorders (Luu et al., 2024). A global systematic review reported a pooled prevalence of depression of approximately 28% during the pandemic (Nochaiwong et al., 2021), while

the World Health Organization estimated that the prevalence of mental health conditions increased by approximately 22% worldwide during the same period (WHO, 2022). These findings showed the substantial psychological burden imposed by the pandemic on populations globally.

Even though mental health challenges affected people across all demographic groups, certain populations experienced increase adverse outcomes (Ning et al., 2026). Migrants, immigrants, refugees, and foreign workers have consistently been identified as more vulnerable due to pre-existing social, economic, cultural, and structural disadvantages (WHO, 2020: Ning et al., 2026). Factors such as language barriers, social isolation, discrimination, insecure employment, limited healthcare access, and uncertainty regarding immigration status may increase susceptibility to poor mental health outcomes among migrant populations (Ikeanyionwu NC, 2026: Ning et al., 2026). In recent time, Japan has experienced a significant increase in the number of foreign migrants over the past decade, driven by demographic changes, labor shortages, globalization, and international education (MHLW). While migrants contribute substantially to Japan's workforce and economic development, many of them will continue to face challenges associated with integration, employment conditions, and access to social support systems (Ning et al., 2026).Previous studies have shown that mental health problems among foreign workers in Japan are associated with demanding working conditions, including long working hours, heavy workloads, job insecurity, and poor remuneration (Hall et al., 2019; Luu et al., 2024; Goel et al., 2015). Mental health concerns are also prevalent within the general Japanese population. A nationwide study conducted between 2013 and 2015 estimated that approximately 5.3% of the Japanese population, which represent about 7.2 million individuals, experienced depressive disorders (Ishikawa et al., 2018). Similarly, Fushimi et al. (2013) reported that approximately 45% of Japanese employees experienced psychological symptoms associated with depression. Also, Kawakami et al. (2005) reported a prevalence of 3.7% for depressive and anxiety disorders among migrants living in Japan. However, evidence showed that mental health challenges among migrants worsened during the COVID-19 pandemic. According to Universalaid.jp (2021), nearly one-third of non-Japanese residents reported deterioration in their mental health during the pandemic. Furthermore, a recent study conducted by Ikeanyionwu NC between 2023 and 2024 among migrants living in Nagasaki Prefecture Japan documented a prevalence rate of major depressive disorder and clinically significant anxiety of 7.97% and 11.35% respectively, suggesting the persistence of significant mental health concerns in the post-pandemic period.To assess mental health outcomes, researchers have employed a range of validated psychometric instruments. Among the most widely used are the Patient Health Questionnaire-9 (PHQ-9), the Depression Anxiety Stress Scales (DASS-21), and other standardized measures that facilitate reliable assessment of depression, anxiety, stress, and psychological well-being across diverse

populations (Kojima et al., 2002). The increasing use of these instruments has contributed substantially to the growing body of evidence regarding migrant mental health in Japan.

Despite the increasing literature, significant gaps exist in understanding the current determinants of mental well-being among migrants in Japan, particularly in the post-pandemic era. Existing studies have mainly focused on the prevalence of mental health disorders, while less attention has been paid to identify the barriers that hinder positive mental health and the facilitators that promote resilience and well-being. Moreover, the rapidly growing migrant population in Japan raises important public health and policy questions regarding the adequacy of existing support systems and the long-term implications of mental health disparities within this population.Therefore, this systematic review aimed to synthesize the current evidence on the barriers to, and facilitators of, mental well-being among migrants and immigrants living in Japan. The review willseek to identify key social, cultural, economic, demographic, and structural factors associated with mental health outcomes in migrant populations. In addition, it will examines existing policy recommendations and intervention strategies proposed within the literature to improve migrant mental health and well-being.A good understanding of these factors is important to inform evidence-based policies, design appropriate interventions and strengthen support systems for migrants in Japan.

Literature review

With an increase in global migration,migrants comprise 3.4% of the world's population in 2016 (United Nations on Migration. 2016). Migrant is anyone who resides either temporarily or permanently in a country where they were not born and has no sufficient social ties in the new location (Abubakar I et al., 2018). It consists of various groups such as Immigrants, expatriate workers, and foreign students as well as other special category of people such as political asylum seekers and refugees (Matthias Trost et al. 2018). While migration is often driven by push and pull factors that are related to economic opportunities, it is also a complex and stressful process that can negatively affect mental health (Mc Cann., 2016). Immigrants are a subset of the "migrants" population. "Migrants" is a broader term that encompasses anyone who is not a native of a particular country, including tourists, temporary workers, students, and immigrants. "Immigrants" specifically refer to individuals who have moved from their home country to another country with the intention of settling there permanently. In other words, all immigrants are migrants, but not all migrants are immigrant (Matthias Trost et al. 2018).

Japan, as one of the world's best economies, hosted 2.2 million of migrants as of October 2018, which is 2% of population (Japan ministry of internal affair, 2020). During that year, around 200,000 immigrants settled in Japan. However, Japan's total population is projected to decrease by 31% from its highest of 126 million in 2016 to estimated 87 million by 2060

(Japan ministry of internal affair, 2020). This demographic shift, caused by "super-ageing," make Japan as the first nation in the history of mankind to be able to have such population decline. Other high-income countries such as South Korea and Italy are on the same demographic trend, which may lead to a rise in the number of young foreign immigrants (Parsons AJQ et al., 2018).According to Japan Immigration Service Agency, as of June 2023, the total number of migrants living in Japan were 3,223,858, with an increase of 148,645 as of December 2022. An increase was more among skilled workers, who were employed in designated sectors without requiring further training. Permanent residents constituted the largest category by residential status, totaling 880,178, which was a 1.9% increase from December 2022. Among all the working visas, technical interns were 358,159, with an increase of 10.2%, while engineers, humanities specialists, and international service professionals, including foreign language instructors, increased by 10.9% (346,116). China,Vietnam, and South Korea were the most populated migrant nationalities in Japan.

2.1 Global Perspective on Mental Health: Pre-pandemic and Pandemic

Before the emergence of COVID-19 pandemic, mental health issues such as depression and clinical anxiety were common among young people worldwide, with estimated prevalence of around 11.6% and 12.9%, respectively (Tiirikainen et al., 2018; Lu, 2019). The declaration of COVID-19 pandemic as a global public health emergency led to widespread disruptions of daily life (Lee, 2020). These disruptions were as a result of COVID-19 social distancing, closure of academic institutions, quarantine measures allcaused family-related stress and reduced peer interaction. All these contributed to increased psychological distress and a rise in mental health issues (Sprang et al., 2013; Loades et al., 2020).According to WHO the prevalence ofdepressive disorder varies across regions based on cultural, demographic, and socioeconomic factors. Before the advent of pandemic, depression affected around 10% of men and 12% of women globally, while anxiety disorders had a point prevalent of 14% (WHO, 2018). However, during the pandemic, there was elevated increase in these conditions, with depression going as high as 22% and anxiety to 25% globally (WHO, 2022). This increment was pronounced in vulnerable groups, such as people with pre-existing medical conditions and those with financial challenges, which shows the role of socioeconomic and health-related determinants.

2.2. Pandemic Period in Japan

In response to the sweeping spread of COVID-19 infection, the government of Japan made a pronouncement of state of emergency on April 7, 2020 and ordered citizens and foreigners to remain indoor, limit social interactions, and comply strictly to COVID-19 preventive measures. During this time, the levels of depression increased among the population mainly due to the shortages of essential protective consumables such as face masks and

alcohol-based sanitizers, and as well as concernoverthe government economic and healthcare responses (Shigemura, 2020). Studies conducted during the early phase of the pandemic alsoshowed a rise in mental health issues. In the same vein, studies carried out between late February and early April 2020 among the residents throughout Japanshowed an increase in cases of major depressive disorder and clinical anxiety (Kikuchi et al., 2020). Another large-scale study that involved 11,333 Japanese workers in May 2020, when compared with pre-pandemic data revealed a 20% increase in individuals having high levels of psychological distress (Yamamoto et al., 2020).Multiple factors were documented as contributing to the worsening mental health outcomes during the pandemic. These were young age groups, financial instability, unemployment, stress at work, sexual harassment and family history of mental health issues and difficulties in interpersonal relationships (Ueda et al., 2020; Kikuchi et al., 2020; Sugawara et al., 2021; Yamamoto et al., 2020). All these factors showed the multifaceted impact of the pandemic on the mental well-being of the Japanese people.

2.3. Mental Health of migrants in Japan:pre-pandemic and pandemic

Various studies have shown that the mental health challenges encountered by migrant workers in Japan is related to their work conditions. Stressors such as extra work hours, heavy workloads, and limited free time were found to impact the mental well-being of migrants in Japan (Hall, B.J et al., 2019). Work overload is one of the major contributors to mental health challenges among foreign care workers (De Diego-Cordero, R et al., 2020). Lack of satisfaction in work conditions, including workload and strained co-worker relationship are added to the stress burden (Goel, K. et al., 2015). Low salaries and wages, coupled with work-related stress were noticed as risk factors for mental health issues among workers (Goel, K. et al., 2015). Also, immigrants' social factors, such as feelings of loneliness, have been linked to depression. Loneliness which was worsened by the long distance between Japan and their home countries, was highlighted as one of the major concerns for foreign healthcare workers (Hall, B.J et al., 2019). The emergence of COVID-19 pandemic further exacerbated social isolation, thereby having unfavorable impact on the mental health condition of migrant workers in Japan (Hwang et al., 2020).

2.4. Migrants Health in Japan

One of Japan's healthcare successes is its national health insurance scheme, where the government allocate 10 percent of the GDP to healthcare cost (Mc Kinsey, C, 2009). Despite this commitment, there are challenges, particularly in ensuring universal health coverage for the vulnerable groups such as migrants who may not fully benefit from the system (Shakya et al., 2018). Reports says that Japan's immigration places more priority on immigrants' control than on immigrants' rights, thereby affecting the access to healthcare for this population (Shakya et al., 2018). Inequalities in healthcare access have been observed among immigrants

living in various prefectures of Japan (Shakya et al., 2018). Also, asylum seekers and migrants with expired travel documents, including visas and passports, are excluded from health insurance coverage in all prefectures in Japan (Yasukawa et al., 2019). Furthermore, majority of hospitals were accused of always refusing to render medical care to migrants patients in Japan who do not have any form of health insurance. In some instances, they impose exorbitant medical fees or insist for the early discharge of uninsured migrant patients (Yasukawa et al., 2019). With the Japanese government shifting its policy to welcome migrant workers, leading to an expected increase in migrants and immigrants (Yasukawa et al., 2019). At the same time, there is a concern about a possible proportionate worsening of mental health conditions among this population.

METHODS

Search Strategy

This systematic review was conducted and reported in accordance with the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) guidelines and recommendations from the Cochrane Handbook for Systematic Reviews of Interventions, which provide internationally recognized standards for ensuring methodological rigor, transparency, and reproducibility in evidence synthesis (Higgins et al., 2023; Page et al., 2021). Adherence to these guidelines enhanced the quality of the review process and facilitated comprehensive reporting of findings. A systematic literature search was undertaken to identify studies that examine the barriers to and facilitators of mental well-being among migrants living in Japan. Searches were conducted across five major electronic databases: PubMed, PsycINFO, Scopus, Web of Science, and Google Scholar. These databases were selected because of their broad coverage of public health, psychology, psychiatry, migration, and social science literature. The search was restricted to studies published between January 2022 and May 2026, reflecting contemporary evidence on migrant mental health in the post-COVID-19 era. Search terms were developed through preliminary scoping searches and consultation of relevant literature. Keywords and Medical Subject Headings (MeSH) where applicable, were combined using Boolean operators ("AND" and "OR") to maximize sensitivity and specificity. The search strategy included combinations of the following terms:

- “migrant” OR “immigrant” OR “foreigner” OR “foreign resident” OR “refugee” OR “international migrant”
- “mental health” OR “mental well-being” OR “psychological well-being” OR “psychological distress” OR “depression” OR “anxiety”
- “Japan”

An example of the search syntax used in PubMed was:

("migrant*" OR "immigrant*" OR "foreign resident*" OR "refugee*") AND ("mental health" OR "mental well-being" OR "psychological distress" OR depression OR anxiety) AND

("Japan")

Only peer-reviewed studies published in English were considered eligible for inclusion to ensure scientific rigor and reliability of findings.

Eligibility Criteria

Studies were included if they met the following criteria:

1. Were published in peer-reviewed journals.
2. Examined migrants, immigrants, foreign residents, refugees, or other international migrant populations living in Japan.
3. Investigated factors associated with mental health or mental well-being.
4. Reported barriers to or facilitators of mental well-being among migrant populations.
5. Employed quantitative, qualitative, or mixed-methods study designs.
6. Were published from January 2022 onward.
7. Studies were excluded if they:
8. Did not focus on migrants living in Japan.
9. Failed to assess mental health or psychological well-being outcomes.
10. Were conference abstracts, editorials, commentaries, expert opinions, dissertations, or single case reports.
11. Used interventional or experimental study designs.
12. Were published before January 2022.
13. Did not provide sufficient data relevant to the review objectives.

Study Selection and Retrieval Process

All records identified through database searches were exported and compiled into a reference management system. Duplicate records were identified and removed prior to screening. Following deduplication, a total of 1,202 records remained for title screening. Titles and abstracts were independently assessed for relevance based on the predefined inclusion and exclusion criteria. Studies that clearly failed to meet the eligibility criteria were excluded at this stage. After title and abstract screening, 150 articles were retained for full-text assessment. Full texts were subsequently reviewed in detail to determine eligibility. Studies that did not adequately address the review objectives or failed to meet the inclusion criteria were excluded. Following full-text evaluation, 12 studies met all eligibility criteria and were included in the final synthesis. The study selection process is illustrated in the PRISMA flow diagram (Figure 1).

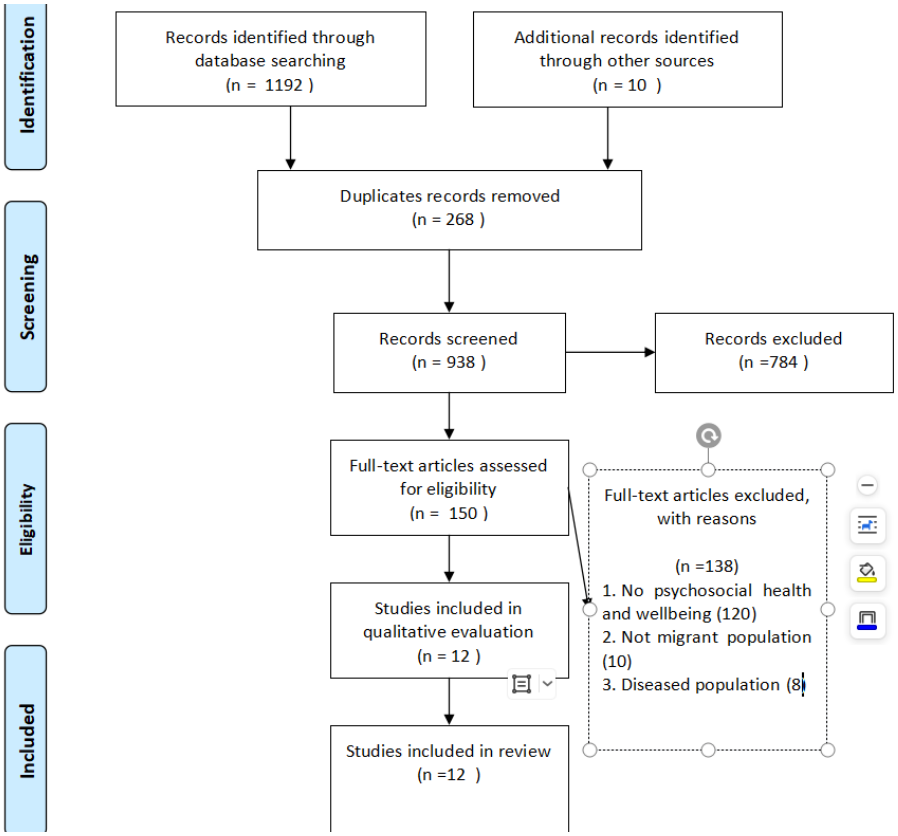
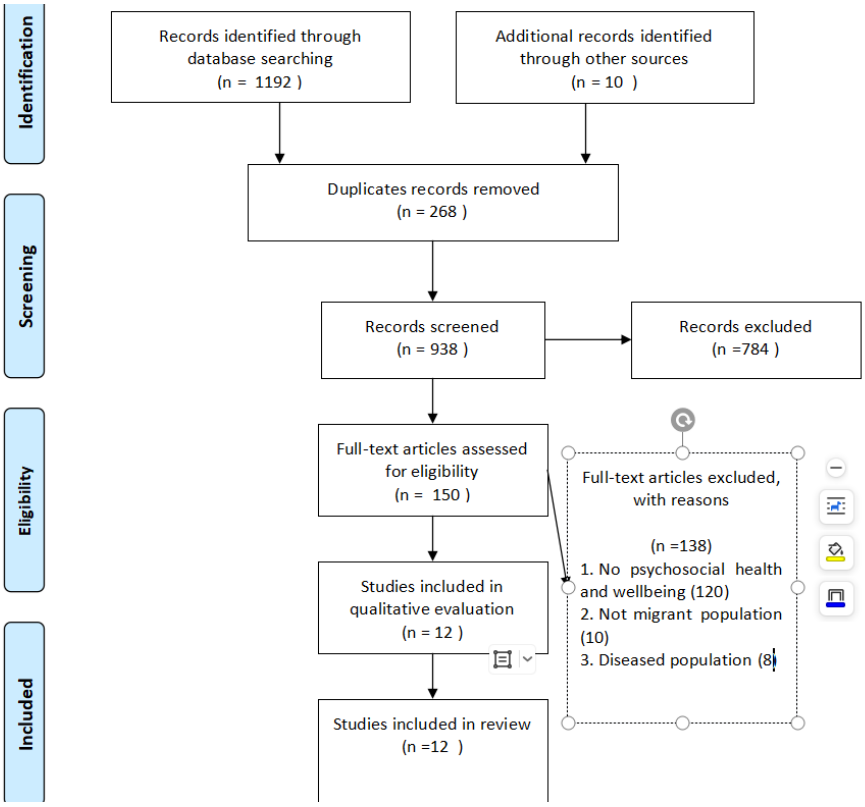


Fig 1: PRISMA flow diagram showing process and outcome of study selection.



Data Extraction

A standardized data extraction form was developed to ensure consistency and accuracy in data collection across studies. Data extraction was performed systematically and included the following information: First author and year of publication, study design, study setting and geographical area, participants' nationality and migrant category, sample size, mental health outcomes assessed, measurement instruments or epidemiological tools used, significant barriers to mental well-being, significant facilitators of mental well-being, key findings and policy implications. Only factors reported as statistically significant or thematically relevant by the original study authors were extracted. Non-significant findings were excluded from the synthesis to maintain focus on determinants with demonstrated associations with mental health outcomes.

Quality Assessment

The methodological quality of included studies was evaluated using the QualSyst Standard Quality Assessment Criteria for Evaluating Primary Research Papers (Kmet et al., 2004). The QualSyst tool is a validated and widely utilized instrument designed to assess the quality of diverse research methodologies across multiple disciplines. The assessment tool consists of 14 criteria which evaluate important methodological domains such as: Clarity of research objectives and questions, appropriateness of study design, adequacy of sample selection procedures, sample size justification, validity and reliability of outcome measures, control of confounding variables, appropriateness of statistical analyses, transparency of data reporting, strength of conclusions. Each study received a quality score ranging from 0 to 1. Consistent with established recommendations, studies that scored ≥ 0.80 were classified as high quality, scores between 0.60 and 0.79 as moderate quality, and scores <0.60 as low quality (Kmet et al., 2004). Of the 12 included studies, seven were rated as high quality, three as moderate quality, and two as low quality. The primary methodological limitation observed among low-quality studies was inadequate sample size, which may have increased the risk of selection bias and reduced statistical power.

Data Synthesis and Analysis

A total of 12 studies were included in the final review. Due to substantial heterogeneity across study populations, research designs, outcome measures, and mental health indicators, statistical pooling through meta-analysis was not considered appropriate. Instead, a thematic synthesis approach was employed by the authors to integrate findings across studies. This method allowed the identification and categorization of recurring themes related to barriers and facilitators of mental well-being among migrants in Japan. Extracted findings were reviewed and grouped into overarching thematic domains. Barriers and facilitators were synthesized based on their reported associations with mental health outcomes such as

psychological distress, depression, anxiety, stress, social isolation, and overall psychological well-being. The thematic synthesis help in comprehensive understanding of the social, economic, cultural, linguistic, and healthcare-related determinants influencing migrant mental health in Japan and informed the development of evidence-based policy recommendations.

RESULTS

Characteristics of Included Studies

The 12 included studies represented diverse migrant populations such as international students, migrant workers, and broader immigrant communities. Five studies focused primarily on international students studying in Japan (Jingru M et al., 2022; Ming Li et al., 2022; Mei et al., 2022; Eriko et al., 2022; Jingru Ma et al., 2025). Seven studies examined migrant workers exclusively (Florent M. et al., 2025; Tadashi et al., 2024; Akihito et al., 2024; Yui F. et al., 2025; Divya et al., 2022; Qin Hu et al., 2026). One study specifically investigated Asian graduate students in Japan (Ming Li et al., 2022), while others focused on specific migrant populations, including Ghanaian migrants (Florent M. et al., 2025), Chinese migrants (Qin Hu et al., 2026), Vietnamese migrants (Tadashi et al., 2024; Akihito et al., 2024; Yui F. et al., 2025), and Nepalese migrants (Divya et al., 2022). One study explored mental health outcomes among a heterogeneous population of international migrants living in Japan (Ikeanyionwu NC, 2026). Across all included studies, a total of 4,622 migrants participated. Participants were primarily recruited through community-based participatory research approaches, institutional networks, migrant organizations, or retrospective reviews of clinical records. The sample sizes varied considerably across included studies, ranging from 16 to 1,122 participants, with a median sample size of 134, reflecting substantial heterogeneity in study scope and design.

The majority of the included studies employed quantitative cross-sectional designs (n = 9), while two studies utilized qualitative methodologies and one was conducted as a case series. Most studies were undertaken in major urban areas, particularly Osaka and Nagasaki, although several studies anonymized their study locations to protect participant confidentiality. Regarding nationality distribution, Vietnamese migrants constituted the largest proportion of participants (42.6%), followed by Chinese migrants (14.2%), Nepalese migrants (14.2%), Ghanaian migrants (14.2%), and mixed international migrant populations (14.2%). Vietnamese migrants were the focus of three separate studies, whereas Chinese, Nepalese, Ghanaian, and mixed migrant populations were each examined in one study. The remaining five studies evaluated multinational groups of international students residing in Japan. A wide range of epidemiological and psychological assessment instruments were used to evaluate mental well-being and psychological distress. While majority of the studies used validated and internationally recognized mental health assessment tools, others utilized locally developed or non-validated instruments, potentially contributing to methodological

heterogeneity across studies.

Thematic Analysis

The thematic synthesis revealed more barriers than facilitators influencing the mental well-being of migrants living in Japan. These factors operated at individual, social, cultural, and structural levels and collectively shaped migrants' psychological experiences and mental health outcomes.

Barriers to Mental Well-Being

Language barriers emerged as the most frequently reported challenge. Five studies identified difficulties in communicating in Japanese as a significant source of psychological distress, social isolation, reduced access to services, and diminished integration into Japanese society. Limited language proficiency usually restricted migrants' ability to establish social relationships, access healthcare, navigate administrative systems, and secure stable employment opportunities, thereby negatively affect mental well-being (Ikeanyionwu NC, 2026). Insufficient social support was another documented barrier. Qin Hu et al. (2026) reported that migrants with limited social support experienced poorer mental health outcomes and greater psychological distress. Similarly, feelings of loneliness and social isolation were consistently associated with adverse mental health consequences. Evidence from Ikeanyionwu NC, (2026) showed that living alone and lacking interpersonal connections increased vulnerability to depression, anxiety, and psychological distress among migrants. Sociodemographic factors also influenced mental well-being. Younger migrants and female migrants were identified as groups at increased risk of adverse mental health outcomes (Ikeanyionwu NC, 2026: Tadashi et al., 2024). These findings suggest that certain demographic groups may face unique psychosocial pressures related to migration, adaptation, and social integration. Economic challenges were another recurrent theme. Financial difficulties, including income insecurity, employment instability, and economic stress, were reported as significant determinants of poor mental health among migrants (Tadashi et al., 2024). Economic hardship may exacerbate psychological distress by increasing uncertainty due to house rent, education, healthcare access, and future opportunities. Experiences of discrimination and social exclusion also emerged as important barriers. Akihito et al. (2024) documented that perceived discrimination and unequal treatment contributed to feelings of marginalization and negatively affected migrants' psychological well-being. Such experiences may undermine migrants' sense of belonging and social acceptance within the host society.

Facilitators of Mental Well-Being

Several protective factors were identified across the reviewed studies. The most consistently reported facilitator was the presence of strong social support networks. Emotional,

informational, and practical support from family members, friends, community organizations, and migrant associations played an important role in promoting resilience and psychological well-being. Social connectedness was particularly important. Qin Hu et al. (2026) reported that maintaining meaningful relationships and regularly interacting with friends significantly enhanced migrants' mental well-being. These relationships provided emotional support, reduced feelings of isolation, and fostered a sense of belonging within the host community. Occupational factors also contributed positively to mental health outcomes. Four studies identified job satisfaction and positive workplace experiences as important facilitators of psychological well-being. Stable employment, fair working conditions, supportive colleagues, and opportunities for professional growth enhance migrants' overall life satisfaction and mental health. Collectively, these findings suggest that migrant mental well-being in Japan is shaped by a complex interaction of linguistic, social, economic, occupational, and cultural factors. While language barriers, social isolation, financial hardship, and discrimination represent major obstacles to mental well-being, strong social networks, meaningful interpersonal relationships, and positive employment experiences serve as important protective factors that promote resilience and psychological adaptation among migrant populations.

DISCUSSION

This systematic review provides a comprehensive synthesis of current evidence on the determinants of mental well-being among international migrants living in Japan. The findings reveal a complex interplay of social, cultural, economic, and structural factors that shape migrants' mental well-being. In all the studies reviewed, access to social support network emerged as the most consistently reported determinant, which function either as a protective factor or a barrier depending on its availability and quality. Other important determinants identified included language proficiency, length of stay in Japan, experiences of discrimination, work-related stress, financial insecurity, visa-related challenges, gender, and cultural adaptation difficulties (Ikeanyionwu NC, 2026; Qin Hu et al., 2026: Ning et al., 2026). The prominence of social support as a determinant of mental well-being is consistent with established migration and mental health literature. Social support networks can provide emotional assistance, practical guidance, access to information, and a sense of belonging, all of which are essential for successful adaptation to a new environment. Migrants who reported stronger social connections, supportive workplaces, educational institutions, or community networks generally demonstrated better mental well-being outcomes (Luu et al., 2024：Ning et al., 2026). Conversely, social isolation and lack of supportive relationships were associated with psychological distress, anxiety, loneliness, and depressive symptoms (Ning et al., 2026). These findings are particularly relevant in Japan, where linguistic and cultural barriers may

impede the development of social networks among newly arrived migrants. The review also highlights the substantial impact of the COVID-19 pandemic on migrant mental well-being. Several studies reported increased prevalence of depressive symptoms, anxiety, psychological distress, and social isolation among migrants during and after the pandemic compared with pre-pandemic levels (Ikeanyionwu NC, 2026; Luu et al., 2024; Tadashi et al., 2024). The pandemic worsened existing vulnerabilities by disrupting social networks, restricted movement, reduced employment opportunities, and limited access to support services. Migrants mostly faced disproportionate socioeconomic consequences during the pandemic due to language barriers and reduced access to health and welfare services. These findings underscore the need to ensure that emergency preparedness and public health responses incorporate migrant populations to prevent mental health inequalities during future crises.

Length of stay in Japan also emerged as another important determinant of mental well-being. Several studies included in this review found that migrants who had lived in Japan for a relatively short period experienced poorer mental well-being, whereas longer duration of residence was generally associated with better psychological outcomes (Ikeanyionwu NC, 2026). This finding aligns with previous studies among Brazilian migrants in Japan, which demonstrated higher prevalence of mental health disorders among newly arrived Brazilian migrants (Miyasaka et al., 2007; Honda G et al., 2005) and lower prevalence among those who had lived in Japan for more than five years (Tsuji K et al., 2001). Such findings support the assimilation theory of migration, which suggests that increased exposure to the host society facilitates adaptation through improved language acquisition, greater cultural familiarity, and enhanced social integration (Dhadda A et al., 2018). However, the relationship between length of stay and mental well-being should be interpreted cautiously. While longer residence may facilitate adaptation and access to resources, previous systematic reviews have shown that this association varies considerably across migrant populations and host-country contexts (Vang ZM et al., 2017). Factors such as immigration status, socioeconomic opportunities, experiences of discrimination, and the availability of culturally appropriate support services may influence whether prolonged residence translates into improved mental well-being (Ning et al., 2026). Consequently, length of stay alone should not be considered a universal predictor of positive mental health outcomes among migrants.

Language proficiency was closely linked to both social integration and mental well-being. Migrants with limited Japanese language skills usually experienced challenges in accessing healthcare, employment opportunities, educational services, and social relationships (Ikeanyionwu NC, 2026). Poor language proficiency may increase dependence on others, reduce self-efficacy, and contribute to feelings of exclusion and isolation. Conversely, improved language skills facilitate communication, promote social participation, and strengthen access to support systems, thereby contributing positively to psychological well-being (Ikeanyionwu NC, 2026). These findings reinforce the importance of accessible

language education programmes as a public health intervention for migrant populations. Discrimination and social exclusion were also associated with poorer mental well-being. Previous studies have documented the detrimental psychological effects of discrimination among migrants (Murphy S., 2022; Zheng G et al., 2005). The current review found that migrants who perceived exclusion from Japanese society reported poorer psychological outcomes. For example, one study documented adverse mental health effects among Chinese migrants who experienced feelings of exclusion and marginalization within Japanese society (Qin Hu et al., 2026). Experiences of discrimination may undermine migrants' sense of belonging, increase stress levels, and hinder successful integration.

The review further identified visa-related factors as potential barriers to mental well-being. In particular, student visa status was associated with increased psychological vulnerability in one study (Ikeanyionwu NC, 2026). International students frequently encounter academic pressure, financial constraints, uncertainty regarding future employment, and limited social support, all of which may adversely affect mental well-being. Given Japan's increasing reliance on international students and foreign workers to address demographic and labour shortages, policymakers should consider developing targeted mental health support services tailored to the unique challenges faced by different migrant groups. Gender differences also emerged within the reviewed literature. Female migrants were more likely to experience barriers to mental well-being than their male counterparts (Ikeanyionwu NC, 2026; Mei et al., 2022). This finding is consistent with previous studies which showed that female migrants often face additional stressors related to caregiving responsibilities, employment insecurity, social vulnerability, and gender-based discrimination (Gkiouleka A et al., 2015). Nevertheless, evidence suggests that women may also be more likely to seek psychological support and utilize available mental health resources than men (MA S-F et al., 2010). These findings indicate the importance of adopting gender-sensitive approaches when designing migrant mental health interventions. An important observation from this review is the consistency of recommendations proposed across the included studies. Most authors advocated for enhanced support systems for migrants, including accessible Japanese language education, stronger community support networks, culturally responsive mental health services, and diversity-focused educational initiatives. These recommendations reflect a growing recognition that migrant mental well-being is influenced not only by individual characteristics but also by broader social and structural determinants. Improving mental well-being therefore requires coordinated action across healthcare, education, employment, and community sectors. The findings of this review carry important implications for public health policy and practice in Japan. As the country's foreign-born population continues to grow, promoting migrant mental well-being should become an integral component of national health and social policy. Interventions aimed to strengthen social support networks, reduce discrimination, improve language access, and facilitate social integration will contribute to

improve mental health outcomes among migrant populations.

The strength of this systematic review is: firstly, its thorough and comprehensive search strategy across multiple academic databases, and its strict adherence to systematic review principles which enhanced the reliability of the evidence identified. Secondly, the thematic synthesis approach enabled the integration of findings from diverse migrant populations, which helped for a holistic understanding of determinants that influenced mental well-being among migrants in Japan. However, several limitations should be put into consideration when interpreting the results of the findings. Firstly, most studies included in the review utilized cross-sectional designs which limits the ability to establish causal relationships between identified determinants and mental well-being outcomes. Therefore, the findings should be interpreted as associations rather than evidence of causation. Secondly, the narrative synthesis approach used in data analysis gave equal consideration to all included studies regardless of sample size, methodological quality, or statistical power which increased the influence of two included lower-quality studies on overall conclusions. Thirdly, the absence of meta-analysis prevented formal assessment of heterogeneity and subgroup differences across migrant populations. Finally, grey literature was not included in the review, which may have resulted in the exclusion of relevant reports, policy documents or unpublished papers that address migrant mental well-being in Japan. Therefore, future reviews should incorporate quantitative meta-analysis and grey literature to provide a more comprehensive assessment of the available evidence.

CONCLUSION

This systematic review showed that mental well-being among international migrants in Japan is influenced by a complex interaction of social, cultural, economic, and structural factors. Among these determinants, the availability and quality of social support networks emerged as the most consistent factor associated with positive mental well-being outcomes. Language proficiency, duration of residence, experiences of discrimination, gender, visa-related challenges, financial insecurity, and work-related stress also play significant roles in shaping migrants' psychological well-being. The findings suggest that promoting migrant mental well-being requires more than individual-level interventions. Structural and policy-level approaches that facilitate social integration, strengthen community support systems, improve language accessibility, reduce discrimination, and provide culturally responsive mental health services are equally essential. As Japan continues to experience demographic changes and increase international migration, addressing the mental well-being of migrants should become a public health priority. Future research should employ longitudinal and mixed-methods designs to better understand causal pathways and the long-term evolution of migrant mental well-being.

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Data Availability

Data supporting the findings and conclusion are available upon reasonable request

Conflict of Interest

We declare no conflict of interest

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