



Psychosocial Needs in refugees and asylum seekers **(NPR)**

CODE:

DATE: _____

REFERENCE CENTER: _____

INTERVIEWER: _____

LANGUAGE OF INTERVIEW:

0. Spanish 1. English 2. Arabic 3. French.

¿HAS ANY INTERPRETER PLAYED? 0. No 1. Yes

Fisrtly, I am going to ask you about some personal dates referring to your migration and your current state. Your answers are completely confidential and they don't have any consequences for you. If you feel uncomfortable, please tell me without any compromise.

1.Sex

0. Woman 1. Man 2. Other

2.How old are you? _____ years old in this moment.

3.What is your nationality?

4.What is your matter language?

1.English 2.Arabic 3.French 4.Others:_____

5.Nowadays, In which fase is your application?

0. Unsupported

Have you presented any recourse for your unsupported? Yes No

1. In the process of admission to transat.

2.Admitted to transat- (less than 6 months).

3.Admitted to transat- (more than 6 months).

4.Denial.



Have you presented any recourse for your denial?

No Yes

5.Favorable decision – Status of refugee.

6.Favorable decision – Subsidiary protection.

7.Favorable decision – Humanitarian reasons.

6.Nowadays, Have you got a relationship?

0. No (Go to item 9) 1.Yes

7.* If you have a relationship, is he/she a refugee person or asylum seeker?

0. No 1.Yes

8.* Is your couple with you?

0. No 1.Yes

9.Have you got any sons or daughters?

0. No (Go to item 11).

1. Yes (how many)_____.

10.If you have any sons or daughters, are they with you here?

0. No

1. Yes

2. Some of them (Number:_____).

11.Does any member of your family living in your host country?

1. No 1.Yes

12.Did you complete your studies?

0. I don't have any studies, (I can't read or write. I can read or write but i went to school less than 3 years).

1. Primary studies (until 11-12 years).

2. First grade secondary education (from 12 to 16 years).

3. Second grade secondary education (from 16 to 18 years).

4. Higher education (University).



13. What is your employment situation at present?

- 0. Employed (what kind of job? _____).
- 1. I work with out a contract of employment.
- 2. Unemployed.
- 3. Housewife.
- 4. Retired.
- 5. Student.
- 6. Disabled or recognized disability.
- 7. Other, (which one? _____).
- 8. Volunteer.

14. In your host country, what was your employment situation?

- 0. Employed (what kind of job? _____).
- 1. I worked with out a contract of employment.
- 2. Unemployed.
- 3. Housewife.
- 4. Retired.
- 5. Student.
- 6. Disabled or recognized disability.
- 7. Other, (which one? _____).

15. Nowadays, what is/are your economic support?

a) Employed.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
b) Family members.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
c) Social aid.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
d) Other, indicate which one _____.	Yes <input type="checkbox"/>	No <input type="checkbox"/>

16. How long were you exposed to the conflict which motived your migration in your host country? _____ Months _____ Years

17. Nowadays, is the conflict which motived your migration finished?

0. No 1. Yes



**18. How long has it been since you left your country of origin? _____
Months.**

19. During your migration process, what kind of transport did you use?

a) Airplane.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
b) Boat or any other type of boat.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
c) Motor vehicles.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
d) Walking	Yes <input type="checkbox"/>	No <input type="checkbox"/>
e) Other, indicate which one _____.	Yes <input type="checkbox"/>	No <input type="checkbox"/>

20. During your migration process, have you been deported?

0. No 1. Yes

21. During your migration process, have you been in a refugee camp?

0. No

1. Yes , in which country or countries? _____, for how long in
which country(days) _____?.

22. During your migration process or when you came to this Country, have you been placed in Direct Provision Centres?

0. No

1. Yes , in which country or countries? _____, for how long in
which one (days) _____?.

23. Do you have any physical disabilities as a result of your migration experiences?

0. No

1. Yes , which ones? _____.

24. How long since you came here (this country)? _____ Months.



25. In which kind of accommodation are you living now?

0. Institutional (Temporary reception centre). Direct Provision.
1. Institutional (Long-term reception centre). Direct Provision.
2. Institutional (Floor reception).
3. Private (Temporary).
4. Private (Permanent or Semi-permanent).

26. How do you rate your level of English?

0. Very low.
1. Low.
2. Medium.
3. High.
4. Very high.
5. Mother tongue.

27. To what extent do you feel accepted by the Irish society?

0. Not at all accepted.
1. A little accepted.
2. Moderately accepted.
3. Quite a lot accepted.
4. Completely accepted.

28. To what extent do you feel integrated into this society?

0. Not at all integrated.
1. A little integrated.
2. Moderately integrated.
3. Quite a lot integrated.
4. Completely integrated.



29. It refers to the resources offered by the host system, did you use some of the following?, or are you currently using some of them?

a) Economic aid (first needs expenses, transport, rent, to obtain documentation...).	Yes <input type="checkbox"/>	No <input type="checkbox"/>
b) Psychological treatment.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
c) Social Care Services.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
d) Training for employment.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
e) Legal advice.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
f) Language training.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
g) Other, indicate which one _____.	Yes <input type="checkbox"/>	No <input type="checkbox"/>

30. Nowadays, what are your main needs?

a) Food.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
b) Medical.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
c) Psychological.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
d) Social.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
e) Employment.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
f) Legal.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
g) Language.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
h) Other, indicate which one _____.	Yes <input type="checkbox"/>	No <input type="checkbox"/>



31. What kind of intervention programs would help you feel better?

0. How to get a job.
1. How to overcome the traumas suffered.
2. How to integrate into the new society.
3. Others. Which ones? _____.

32. Before your migration process, how did you feel about the support from your social environment (family, friends...)?

0. Little support.
1. Average.
2. Good support.

33. After your migration process, how is your social support?

0. Little support.
1. Average.
2. Good support.

34. Due to the experiences caused by your migration process, have you received psychological or psychiatric treatment?

0. No
1. Yes (Indicate the type of treatment): _____.

35. Are you currently receiving psychological treatment?

0. No
1. Yes. (Indicate the type of treatment): _____.

36. During the last month, have you taken any psychiatric drugs (tranquilizer, sleeping pills, barbiturates, anxiolytic...)?

0. No (Go to item 38).
1. Yes. (Indicate the name of the drug: _____).

37.* During the last month, how often did you take these drugs?.

0. One or less times a month.
1. Between two and four times a month.
2. Between two and three times a week.
3. Four or more times a week.

38. During the last month, how often did you drink alcohol?

0. Never. (Go to item 41).
1. Between two and four times a month.
2. Between two and three times a week.
3. Four or more times a week.



39.*During the last month, how many alcoholic drinks did you consume at any one time?

0. 1 or 2.
1. 3 or 4.
2. 5 or 6.
3. 7 to 9.
4. 10 or more.

40.* During the last month, how often did you take six alcoholic drinks or more on any one occasion?

0. Never.
1. Less than once a month.
2. Monthly.
3. Weekly.
4. Daily or almost daily.

41.During the last month, have you taken any other drug (cocaine, cannabis, synthetic drug...)? (It doesn't include psychiatric drugs).

0. No (Finish the interview).
1. Yes, which ones?_____.

42.*During the last month, how often did you take some of these drugs?

0. Once or less times a month.
1. Between two and four times a month.
2. Between two and three times a week.
3. Four or more times a week.