

Are Self-rated Health, Native Finnish Friends and Having Children under School Age Associated with Employment? Kurdish and Somali migrants in Finland

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Abstract

In Western countries, entry into the labour market is difficult for humanitarian migrants, especially women. The aim of our study was to examine the association of health, native Finnish friends and having under school-age children with employment among humanitarian migrants.

The data were drawn from the Finnish Migrant Health and Wellbeing Study. The sample comprised 479 migrants of Kurdish and Somali origin (men n=248; women n=231). We analysed the associations of self-rated health, having Finnish friends and under school age children with employment using multinomial regression modelling.

After adjustment for several well-established determinants of employment, having Finnish friends and good health were robustly associated with employment among women. In the age-adjusted model, having 3–6 years old children was related to lower employment among women, but after all adjustments, the association became nonsignificant. All these associations were nonsignificant among male migrants.

To conclude, good health and bridging social relations with natives play a role in streng-thening employment opportunities among female humanitarian migrants.

Keywords: employment; health; migrants; social network; family situation

Introduction

The number of migrants entering Europe has increased dramatically in recent years. The integration of newly arrived migrants into the host country is an extremely important policy goal throughout Europe. Employment is an effective means of integrating newcomers and for preventing their social exclusion. Previous research indicates that quick integration into the host country's labour market has long-lasting consequences for migrants' successful inclusion in other areas of life (e.g., Healey 2014; Kogan and Weissmann 2013). Labour market integration is, however, difficult for migrants. Earlier research indicates that entry into the labour market is easier for migrants from countries like the host country than for those from culturally, economically, or geographically different countries (Chiswick et al. 2005; see also Heath, Rothon, and Kilpi 2008). Migrant women with humanitarian backgrounds face particular difficulties in finding employment (Larja and Sutela 2015). Previous research on the underlying factors related to poorer labour market integration among migrants is, however, scarce. More research is needed on how to break the barriers to employment and to promote successful transition to work life in order to improve the socioeconomic opportunities of migrants, facilitate their social integration, and improve their well-being. This study examines the factors associated with higher employment among humanitarian migrants of Kurdish and Somali origin, who have a particularly low level of employment in Finland. About 38% of the men and 48% of the women belonging to these migrant groups are currently unemployed (Statistics Finland 2019a). Most Somali and Kurdish migrants have moved to Finland as refugees or asylum seekers. In addition, about a third of the Kurdish and Somali women of our sample had a residence permit based on family reunification. (Castaneda et al. 2018; Rask et al. 2015.) In this study, we use the term humanitarian migrant to refer to Kurdish and Somali migrants who have moved to Finland as refugees, asylum seekers or for family reunification.

Factors related to migrants' employment

Previous research shows that education is a key factor in promoting migrants' employment (e.g., Chiswick 1978). A low level of education increases the risk of having no employment (e.g., Akresh 2006; Behtoui and Olson 2014; Grenier and Xue 2011; Parella, Petroff, and Solé 2013). Similarly, a short time of residence in the new country (Chiswick, Lee, and Miller 2005; Olofsson and Malmberg 2011) has been found to elevate the risk of unemployment. Earlier studies have also highlighted the importance of human resources such as work experience (Becker 1964; Chiswick 1978) and language skills (e.g., Esser 2006; Grenier and Xue 201) in migrants' employment opportunities. However, these human capital factors have only partly explained the variation in humanitarian migrants' employment rates.

The present study examined the role of the less studied, potentially underlying factors of employment and nonemployment among migrants, using a large sample of face-to-face structured interviews. Firstly, a good health status is one of the core resources in a labour market characterised by a high tempo and intensity. Several studies have explored

the association between poor health and unemployment among general populations in Europe (e.g., Arrow 1996; Schuring et al. 2007). For example, evidence from two prospective studies in Finland indicates that health problems reduce employment (Virtanen et al. 2005). The findings of longitudinal studies from the Netherlands (Wagenaar et al. 2012) and Sweden (Virtanen et al. 2013) similarly show that poor health is a risk factor for unemployment. Health status might be a particular potential factor behind unemployment among humanitarian migrants, because the severity of their health problems, often caused by war and violence in their home country, are often pronounced, and other sociocultural resources are low (e.g., language skills) (e.g., Ellis et al. 2008; Fazel, Wheeler, and Danesh 2005; Gerritsen et al. 2006; Goosen et al. 2014).

Humanitarian migrants often seem to face particular health-related challenges and are vulnerable to threats to their physical and mental health (Gushulak et al. 2010; Rechel et al. 2011). The migration process, from premigration through movement and arrival, to integration may also influence migrants' health. For example, both the physical and socioeconomic environment of their home country, as well as that during movement, may have a detrimental effect on their health. In the new home country, linguistic or cultural barriers may limit their possibilities to seek help and access to health services. (Gushulak et al. 2010.) Moreover, gender may play a significant role in the relationship between health and employment. For example, Arrow (1996) showed that compared to men, women were at an increased risk of unemployment because of ill-health. Similarly, Strandh et al. (2013) showed that the different gender roles (e.g., in the family) and social positions of men and women could affect the relationship between employment and health. However, to our knowledge, the relationship between health and employment among humanitarian migrants – in particular from the gender perspective – has remained underexplored. In this study, we assume that good self-rated health is likely to be associated with higher employment among Kurdish and Somali men and women.

Secondly, social networks may play a crucial role in the employment process of migrants. Social capital theories (e.g., Portes 1995) highlight the importance of social networks for employment among migrants. These theories often make a distinction between "bonding" and "bridging" social networks (Putnam 2000). Generally, bonding social networks refer to within-group connections such as family, whereas bridging social networks refer to between-group connections (Putnam 2000; see also Lancee 2010). Bonding social networks, such as kin and compatriots, can be utilised as a supporting community (Behtoui and Olsson 2014), and social networks with compatriots living in the host country can provide support and information regarding employment possibilities in the new environment. However, close ties with family, relatives and compatriots may also act as a barrier to employment outside of the ethnic community's network, or lead to lower-skilled jobs (Akhlaq 2015; Portes and Rumbaut 2001).

Bridging social networks with natives could be particularly valuable for the employment opportunities of migrants. Earlier research shows that close relationships with natives are likely to be related to employment (e.g., Gordon 1964; Grenier and Xue 2011; Kanas, van Tubergen, and Van der Lippe 2011; Moroşanu 2016, Lancee 2010), although some findings are also contradictory. For example, in Canada, Grenier and Xue (2011) found that ethnically diverse friendship networks were associated with employment

among men, but not among women. However, these analyses were conducted among heterogeneous groups of migrants, and more detailed information is needed regarding the importance of bridging social networks for both genders. In Finland, Alho (forthcoming) is suggesting that the lack of social networks may be partly related to their difficulties in finding employment. In addition, gendered cultural expectations related to the social roles of men and women among humanitarian migrants may influence the socioeconomic integration of men and women differently. For example, Somali women and men have been found to have separate social networks with few cross-linkages (Engebrigtsen 2007). It is thus important to explore whether friendships with native Finns are related to employment among humanitarian migrants, and whether these associations differ by gender. Therefore, we assume that having Finnish friends is likely to be associated with higher employment among Kurdish and Somali men and women.

Thirdly, having under school-age children may be related to the labour market participation of humanitarian migrants. However, the distinct social roles that affect women's participation in working life may mean that this association is different among migrant men and women. Previous evidence from Finland indicates that the employment rate among foreign-born mothers with children under the age of 18 is considerably lower than that of native Finnish mothers (Sutela 2016). Generally, humanitarian migrant families have a higher number of children than native Finnish families. The fertility rate among Somali women is 4.0 and among Iraqi women 2.7, compared to 1.4 among native Finnish women (Statistics Finland 2019c). In Somali culture, men and women have separate role expectancies and responsibilities. Child-rearing is traditionally the woman's responsibility, whereas men are usually the breadwinners of the family (e.g., Degni, Pöntinen, and Mölsä 2006; Engebrigtsen 2007; Sales and Gregory 1998). Similarly, Kurdish culture is characterised by collectivism, strong social cohesion, and again, the role of the man as breadwinner (e.g., Taloyan et al. 2008). Thus, combining traditional care roles with professional work may be challenging, especially for the women in these groups (e.g., Andersson and Scott 2007; Sales and Gregory 1998).

Previous research indicates that humanitarian migrants may find it difficult to combine work and the care of young children (Wall & Sao Jose 2004). Both Finnish (Tervola 2015) and international studies (e.g., Brandon 2004) show that migrant families are more likely than natives to take care of their children at home. In Finland, home care allowance is paid for taking care of children under the age of three at home, as an alternative to sending them to municipal home care. Thus, the focus of the present study is on migrants whose youngest child is under school age, between the age of three and six, i.e., those who are not entitled to child home care allowance provided by the state. We assume that having under school-age children may lower the likelihood of employment, particularly among female migrants with humanitarian backgrounds.

Study aims

In summary, the aim of the present study is to examine the association of self-rated health, bridging social networks with natives, and having under school-age children with

employment among humanitarian migrants of Somalian and Kurdish origin, after adjusting for traditional human capital indicators (i.e., education, years of residence, work experience, and language proficiency). Using structured face-to-face bilingual interviews of a random population sample, this study examines whether men and women with humanitarian migrant background differ in terms of these explanatory factors. The topic is highly important at the EU level: humanitarian migrants have great difficulties finding their position in the labour market, and female non-EU migrants are in the most precarious position (Eurostat 2015). Increasing knowledge regarding the mechanisms that affect employment among male and female humanitarian migrants would help address the issue of low employment rates among this group in the future.

Migrants of Kurdish and Somali origin in Finland

In 2018, more than 400 000 people of foreign origin were permanently living in Finland, comprising about 7.3% of the country's total population. The largest groups of foreign citizens living permanently in Finland are of Russian, Estonian, Somalian, and Kurdish origin. (Statistics Finland 2019a, 2019b.) The number of migrants in Finland has grown rapidly since the 1990s. The rise in the number of migrants in Finland has also increased the proportion of migrants in the labour market. The number of employees with a foreign background has grown from 31 500 in 2000 to 145 000 in 2017 (Statistics Finland 2019a). As a result, workplaces are becoming increasingly multicultural. For example, in 2009, about 29% of employees reported having migrants as co-workers, whereas in 2012 the amount had increased to 39% (Toivanen & Bergbom 2013). The number of employees with a migrant background is growing steadily, particularly in Southern Finland.

Labour market participation is lower among migrants than among natives in Finland. In 2018, the employment rate among 18- to 64-year-old persons with foreign background born abroad was 56%, compared to 74% among natives and persons with foreign background born in Finland (Integration Indicators database 2020). There are major differences in employment rates between different migrant groups. In 2017, the unemployment rates were the highest among Somali (43%; men 39%, women 49%) and Kurdish (40%; men 38%, women 46%) origin migrants. The difference to natives is considerable: for natives (i.e., Finnish- or Swedish-speaking population), the unemployment rate in 2017 was 12% for men, and 9% for women. (Statistics Finland 2019a.)

Although their cultural backgrounds differ to some extent, Somali and Kurdish migrants have many similarities. A vast majority of Somali and Kurdish migrants have moved to Finland as refugees, asylum seekers or for family reunification (Rask et al. 2015). Somali were the first large refugee group to seek asylum in Finland at the beginning of the 1990s. Somali migrants are the third largest migrant group in Finland and the largest refugee origin group. In 2017, 20 007 Somali-speaking inhabitants were living in Finland. Of these, 5752 belonged to the labour force (employment rates: men 61%, women 51%), whereas 14 255 did not (i.e., 0- to 14-year-olds, students, conscripts, conscientious objectors, pensioners, or those outside the labour force for other reasons). Kurdish-speaking migrants are the fourth largest migrant group in Finland, and Iraqi and

Iranian refugees are among the largest quota refugee groups to have arrived in Finland in recent years. In 2017, 13 327 Kurdish-speaking inhabitants were living in Finland. Of these, 5758 belonged to the labour force (employment rates: men 62%, women 54%), whereas 7569 did not. (Statistics Finland 2019a, 2019b.) In addition to the similarities in socioeconomic and historical backgrounds, both ethnic groups share rather traditional gender values, and the role of men as the breadwinner of the family is deeply rooted in both cultures (e.g., Sales & Gregory 1998; Taloyan et al. 2008).

Participants and methods

The data of the present cross-sectional study are from the Finnish Migrant Health and Wellbeing Study (Maamu) and were collected in 2010–2012 through structured face-to-face interviews of three migrant groups: Russian, Somali and Kurdish. The data were gathered by trained personnel of Russian, Somali, and Kurdish origin who spoke both the language of the respective target group and Finnish. The three groups of migrants from different geographical areas were selected because they are among the largest migrant groups in Finland (Finnish Ministry of the Interior 2012), and belong to potentially vulnerable groups, in particular those with refugee status (i.e., Somali and Kurdish migrants).

This study uses data on the humanitarian migrants, i.e., the Somali and Kurdish populations. The study sample consisted of 18- to 64-year-old first generation migrants of Kurdish and Somali origin living in six cities: Helsinki, Espoo, Vantaa, Turku, Tampere, and Vaasa. In 2008, when the study was planned, 93% of Somali, and 67% Kurdish migrants in Finland lived in these six municipalities. A sample of 2000 individuals (i.e., 1000 from both ethnic groups) was randomly selected from the Finnish Population Register. The inclusion criteria for Somali origin was birthplace in Somalia, and for Kurdish origin migrants, birthplace in Iraq or Iran, and Kurdish as mother tongue. An additional inclusion criterion was at least one year of residence in Finland. Those still living in reception centres were not included. The participation rates for the interview part of the study were 42% for men (n=433) and 44% (n=421) for women in the Somali/Kurdish sample. Response rates for Somali was 35%, and 51% for the Kurdish sample. Students, pensioners, those took care of their own under three-year-old child/children, and others who did not fulfil the employment criteria (please see Measures section below), were excluded from the data, leaving a sample of 248 men (73 Somali and 175 Kurdish) and 231 women (96 Somali and 135 Kurdish). If the person had both a child under the age of 3 and a child between ages 3 and 6, she/he was included in the study. Of the sample, men worked most typically as service and sales workers and entrepreneurs. Most women worked as service and sales workers. In fact, these occupations were among the most common also among all Somalian and Kurdish employees in Finland (Statistics Finland 2019a).

The Maamu Study was approved by the Coordinating Ethical Committee of the Helsinki and Uusimaa Hospital Region, Finland. Details on the Maamu Study and data collection are reported elsewhere (Castaneda et al. 2018).

Measures

Outcome Variable

The outcome variable was *employment status*. All those who worked full time or part time for 10 hours or more per week were categorised as employed while those with less than 10 weekly working hours were defined as unemployed. Those who took care of their own child/children aged over three were categorised as unemployed.

Determinants

Self-rated health was measured using the question: "How do you rate your health at the moment?". The item was rated from 1 (good) to 5 (poor). The question was dichotomised to poor/moderate (categories 3–5) and good (categories 1–2) health. Having Finnish friends was measured by asking: "How many good friends of Finnish origin do you have?". The variable was categorised into two: 0 = no Finnish friends, 1 = at least one Finnish friend. Under school-age children measured the number of young children aged between three and six in the household. The variable was categorised into two, indicating having under school-age children: 0 = no, 1 = yes.

Control Variables

The control variables included in our study were selected based on previous literature: age, place of residence, education, years of residency in Finland, work experience before Finland, and Finnish/Swedish language proficiency (the two main official languages of Finland). Place of residence was a dichotomous variable (1= Helsinki Metropolitan area, i.e., Helsinki, Espoo, Vantaa, 2=other, i.e., Turku, Tampere, Vaasa). Education measured the person's highest level of education completed either abroad or in Finland, using a three-point scale (1 = no vocational training, 2 = vocational training, 3 = university degree). Vocational training includes both vocational education, further qualifications and specialist qualifications as well as vocational courses. University degree includes both degrees in universities and universities of applied sciences. Years of residency in Finland was divided into three categories: 1 = under 6 years, 2 = 6-10 years, 3 = over 10 years. Work experience before Finland was a single-item no (=0) – yes (=1) question regarding any employment outside the home before coming to Finland. Self-rated Finnish/Swedish language proficiency consisted of four items: understanding, talking, reading, and writing skills in Finnish/Swedish. All items were rated on a five-point scale (1= completely insufficient; 5 = completely sufficient). The sum score was dichotomised as weak/moderate (≤ 14) and good (>14) language skills.

Statistical Analyses

We applied logistic regression models to examine the associations between independent variables and employment among migrants. In total, nine models were tested on both genders. First, we examined the associations between confounding variables (i.e., age, place of residence, education, residency in Finland, work experience before Finland, and Finnish/Swedish language proficiency) and employment. Thus, this model included the

selected covariates that have been associated with employment in previous studies. Next, we examined the relationships between independent variables (i.e., self-rated health, having Finnish friends, having under school-age children) and employment. The group membership (i.e., Somalian, Kurdish) was adjusted in each model. Each association was first tested and adjusted for age only. Following this, all selected covariates were included in order to examine the relationship between the selected independent variable and employment. All statistical models were run separately for men and women. The associations are presented as odds ratios and their 95% confidence intervals (95% CI). P-values of <0.05 were considered statistically significant. However, it should be noted that p-value of >0.05 does not prove that there would be no associations in the population. We also tested the interaction between gender and independent variables on employment.

We adjusted weighting to account for the complex survey design. Inverse probability weights (IPW) calculated by age group, gender, ethnic group, municipality and marital status were used to account for different sampling probabilities, to reduce the effects of nonresponse, and to produce estimates for means and percentages that are representative of Somali and Kurdish migrants in Finland (Rask et al. 2015). By doing this, the distribution of the sample was returned to that of the original sample (Djerf et al. 2005). In addition to weighting adjustment, we also applied finite population correction (FPC) in order to produce more accurate results. Analyses were conducted using SAS 9.4 and SUDAAN 10 statistical software.

Results

Table 1 summarises the main characteristics of the study participants. 57% of the men were employed, whereas only 39% of the female participants.

Table 2 presents the age-adjusted model of the relationships between confounding variables and employment in this cross-sectional study. Among men, age, place of residence, and education were related to employment. Men aged from 45 to 54 (OR 0.31; CI 0.13-0.74) or over 54 (OR 0.08, 95% CI 0.02-0.43) had considerably lower employment levels than younger men. Living outside the Helsinki metropolitan area was associated with higher employment levels among men (OR 2.35, 95% CI 1.30-4.23), as was having a university degree (OR 7.71, 95% CI 2.88-20.63). For women, education, and Finnish/Swedish language proficiency were associated with higher levels of employment. As among men, having a university degree was also associated with higher levels of employment among women (OR 6.11, 95% CI 1.69-22.09). Good Finnish/Swedish language skills were associated with a higher likelihood of being employed (OR 3.34, 95% CI 1.58-7.05). In our sample, we did not find a positive association between employment and length of residency in Finland or prior work experience before coming to Finland, among either men or women.

Table 1. Characteristics of the study population by gender.

	Men n=248 % ¹ (n) ²	Women n= 231 % ¹ (n) ²
Employed no yes	43.0 (108) 57.0 (140)	61.4 (142) 38.6 (89)
Age (years) 18-34 35-44 45-54 54-64	46.9 (106) 30.4 (79) 17.8 (50) 4.9 (13)	35.9 (78) 35.2 (83) 23.7 (59) 5.1 (11)
Place of residence Metropolitan area Other	65.7 (148) 34.3 (100)	74.0 (157) 26.0 (74)
Education no vocational training vocational training university degree	48.7 (124) 34.4 (84) 16.9 (40)	61.0 (139) 30.5 (69) 8.5 (22)
Residency in Finland under 6 years 6–10 years over 10 years	11.3 (28) 33.8 (85) 55.0 (135)	6.6 (19) 21.1 (53) 72.4 (158)
Work experience before Finland no yes	37.8 (91) 62.2 (154)	79.7 (175) 20.3 (49)
Finnish/Swedish language proficiency weak / moderate good	51.8 (131) 48.2 (112)	64.6 (144) 35.4 (74)
Self-rated health poor / moderate good	21.1 (54) 78.9 (194)	31.8 (75) 68.2 (153)
Finnish friends no yes	63.2 (161) 36.8 (84)	66.9 (145) 33.1 (74)
Children of 3–6 years no yes	74.0 (182) 26.0 (66)	74.8 (173) 25.2 (58)

¹ weighted prevalence ² crude n

Table 2. Age-adjusted model: confounding factors related to employment by gender.

	Men OR (95% CI)	Women OR (95% CI)	
Age (years)			
18–34	1.00	1.00	
35–44	0.53 (0.24-1.17)	1.38 (0.63-3.04)	
45–54	0.31 (0.13-0.74) 1.12 (0.42-2.97)		
over 54	0.08 (0.02-0.43)	0.30 (0.05-1.90)	
Place of residence			
Metropolitan area	1.00	1.00	
Other	2.35 (1.30-4.23)	1.90 (0.92-3.93)	
Education no vocational training vocational training university degree	1.00 1.64 (0.90-3.01) 7.71 (2.88-20.63)	1.00 1.98 (0.95-4.15) 6.11 (1.69-22.09)	
Residency in Finland			
under 6 years	1.00	1.00	
6–10 years	1.67 (0.68-4.13)	2.01 (0.37-10.96)	
over 10 years	1.80 (0.65-4.96)	3.87 (0.70-21.30)	
Work experience before Finland			
no	1.00	1.00	
yes	0.88 (0.43-1.82)	0.83 (0.34-2.08)	
Finnish/Swedish language proficiency			
weak / moderate	1.00		
good	1.05 (0.49-2.23)	3.34 (1.58-7.05)	

Table 3 presents the age-adjusted models and the fully adjusted models describing the associations between the main explanatory variables and employment. In the age-adjusted model, only age was adjusted for, whereas in the full model, all the confounding variables were adjusted for. Among men, all the associations were nonsignificant. Among women, however, self-rated health, Finnish friends and having under school-age children were all related to employment in the age-adjusted model. In the fully adjusted model, good self-rated health (OR 4.49; 95% CI 1.85-10.89) and having native Finnish friends were associated with higher levels of employment (OR 2.79; 95% CI 1.39-5.58). The association between having under school-age children and employment was insignificant (*OR* 0.64; 95% CI 0.30-1.33).

We also tested the interaction effect between gender and the independent variables on employment in the fully adjusted model (presented in Table 3). The interaction effect was significant in relation to self-rated health and having Finnish friends, thus indicating significant differences between men and women.

	Men age-adjusted model OR (95% CI)	Men fully adjusted ¹ OR (95% CI)	Women age-adjusted model OR (95% CI)	Women fully adjusted ¹ OR (95% CI)	P for gender interaction fully adjusted ¹
Self-rated health poor / moderate good	1.00 1.50 (0.81-2.79)	1.00 1.50 (0.77-2.91)	1.00 3.42 (1.82-6.43)	1.00 4.49 (1.85-10.89)	<.001
Finnish friends no yes	1.00 0.75 (0.44-1.30)	1.00 0.93 (0.49-1.76)	1.00 3.92 (2.20-7.00)	1.00 2.79 (1.39-5.58)	.01
Children of 3-6 years no yes	1.00 1.10 (0.62-1.94)	1.00 1.05 (0.54-2.06)	1.00 0.49 (0.26-0.95)	1.00 0.64 (0.30-1.33)	ns

Table 3. Factors related to employment by gender.

Discussion

Several obstacles hinder the labour force participation of humanitarian migrants in Europe. Previous studies have shown that traditional indicators of human capital, such as education and language skills, promote employment among migrants in the new home country. However, a considerable proportion of the differences in employment rates between humanitarian migrants and other populations have remained unexplained. In this cross-sectional study, we wanted to focus on the less explored factors that potentially contribute to employment opportunities among female and male migrants with humanitarian backgrounds. We used comprehensive population-based data, collected through structured face-to-face interviews, to examine employment among Kurdish and Somali migrants living in Finland. We found that self-rated health and friendships with natives were related to employment among female humanitarian migrants, after controlling for demographic and human capital characteristics. Having under school-age children aged between three and six was less clearly associated with lower employment among women. By showing the importance of these factors for employment and the gender-specific differences, we contribute to the research explaining the potential mechanisms that affect employment among female humanitarian migrants.

As assumed, good self-rated health had a robust link with a higher rate of employment. This result is in line with previous longitudinal studies among native populations that show the effect of health on employment (e.g., Virtanen et al. 2005; Virtanen et al. 2013; Wagenaar et al. 2012). However, the association was nonsignificant among men. One possible explanation for the observed gender differences is the traditional gender roles in the cultures of humanitarian migrants. As Somali and Kurdish women are tradi-

Adjusted for group membership (i.e., Somalian, Kurdish), age, place of residence, education, time of residence, work experience before Finland, and language proficiency.

tionally responsible for child-rearing and taking care of the household, and men go out to work and earn the money (e.g., Degni et al. 2006; Sales and Gregory 1998; Taloyan et al. 2008), even minor health problems may discourage women's labour market participation, and men are more likely to seek work and stay at work even with health problems. We propose that distinctive social and economic roles and the social positions of men and women in the labour market and in the family may thus produce gendered differences in the relationship between employment and health among humanitarian migrants (see also Strandh et al., 2013; Olesen et al., 2013).

Another explanation for the nonsignificant relationship between health and employment among men could be the underreporting of health problems. Although some evidence exists on the social stigma of health-related problems in the Somali community (e.g., Mölsä, Hjelde, and Tiilikainen 2010), to the best of our knowledge, none of the previous studies have reported that Somali males have any exclusive tendency to underreport health problems (e.g., Mölsä et al. 2010; Pavlish, Noor and Brandt 2010).

In accordance with social network theories (e.g., Portes 1995), the findings of this study show that having Finnish friends, i.e., bridging between-group networks may enhance employment among women with humanitarian backgrounds. Having native friends may increase women's opportunities to be part of the community, help them integrate into the new society, and facilitate their learning of the host country's language. For example, a native friend can provide valuable information on the possibilities for integration, education and training, as well as on the functioning of society as a whole. Moreover, having a native Finnish friend may help migrant women expand their views on the traditional gender roles related to home and work. A native friend may also offer a concrete link to employment and facilitate the entry of a migrant woman into the Finnish labour market, by for example providing job seeking support, helping with possible language problems in job searches, and utilising their own professional networks for finding the migrant a job (e.g., Berkman & Glass 2000). In line with recent discussions on social networks (e.g., Putnam 2000) and empirical findings (e.g., Lancee 2010), forming social connections with natives seems to yield positive returns in employment among humanitarian women in Finland. To sum up, building social contacts with natives may offer migrant women important support in their new home country and consequently promote their successful integration into the labour market.

A potential explanation for the observed gender differences could be the importance of social support and networks for men and women in general. Previous research has proposed that it is easier for women to provide social support and receive it from close relations compared to men, for whom it is more difficult to seek and obtain social support (e.g., Barbee et al. 1993). Another reason for the nonsignificant association among men may be related to the high prevalence of ethnic employment among humanitarian males. Kurdish men in particular are often employed in restaurants run by their compatriots. In terms of employment, this may emphasise the role of social ties with people of the same ethnic origin.

Finally, we examined the relationship between having under school-age children and employment among humanitarian migrants. As assumed, having under school-age children between 3 and 6 years of age was associated with lower employment levels among

Somali and Kurdish women in the age-adjusted model. However, in the fully-adjusted model, the association was nonsignificant among both men and women. It is thus likely that the associations of the human capital factors and having under school-age children with employment are intertwined. Some previous evidence shows that maternity, poor Finnish/Swedish language skills, and low education are all related to low employment among foreign-born women (Sutela 2016). Women from the Middle East and North Africa in particular face difficulties in finding employment because of maternity and lack of human capital resources. Our results specifically concern groups of women who are no longer entitled to social benefits due to the age of their children. Moreover, spending several years at home and taking care of small children probably limits humanitarian women's opportunities to educate themselves and participate in language courses, also leading to lower employment.

The 'double disadvantage' of being a migrant and a woman (Rubin et al. 2008, see also Anthias and Mehta 2003) hampers the participation in the labour market of female humanitarian migrants in many western countries. These women's employment status may be affected by the traditional gendered roles and positions in the family and in working life (e.g., Degni et al. 2006; Engebrigtsen 2007; Sales and Gregory 1998; Taloyan et al. 2008). For female migrants who have spent several years at home taking care of their children, important contacts with natives that could promote their employment opportunities are likely to be limited. Thus, new tailored policies and practices to facilitate the work-life balance among humanitarian migrants could enhance women's participation in the labour market. For example, organising child day-care services that enable migrant women to participate in language courses, integration training, job search training, or vocational labour market training could serve as tools to promote their labour market participation. In addition, women should be encouraged to create social networks in their neighbourhoods. In fact, previous research suggest that children may also have an integrating function for immigrant women (Shaeffer, 2013). On the other hand, working outside home may not be an important life goal for many immigrant women, that is, they might give a higher priority to family life and looking after their children, instead of finding a job. However, as reported, in our data, immigrant women give a very high value to working life, and thus, their aims to enter labour market should certainly be supported.

The main strengths of our study are its comprehensive national population survey data, the use of bilingual face-to-face interviewers, and a relatively high participation rate. However, we were unable to examine the models separately for Kurdish and Somali ethnic groups due to the low number of participants in the female Somali group after exclusion of women with under three-year-old children at the point of data collection. Combining these migrant groups was not the optimal solution. However, the considerable similarities between Somali and Kurdish migrants in Finland (e.g., humanitarian migrant background, high unemployment rate, gender roles) support our decision to study these groups together. In addition, it should be noted that as we excluded some population subgroups from the data, we may obviously lose some information on the picture of employment among migrants. In particular, students and those who took care of their own under three-year-old child/children, could have at least partly been outside the labour force precisely because they have had difficulties in finding a job.

In addition, we acknowledge that our data is rather small, particularly as the analyses are conducted separately for gender. Obviously, the small data set may cause some problems in analyses, for example, difficulties finding statistically significant associations. As an example, based on rather high odds rations, it is likely that there is an association between employment and length of residence in the whole migrant population, however, due to the small data, the association is not statistically significant. Similarly, it could be plausible, that there actually is a statistically significant gender interaction in the association between health and employment, which, however, does not reach the statistical significance due to the small sample size. Similarly, we found some rather high odd ratios (e.g., concerning self-rated health among men), though nonsignificant, which may be related to the small data set. To sum, despite the usual criterion for statistical significance (p < .05) is not reached in all the examined associations, there could be an association in the population.

Moreover, as our study was cross-sectional, we could not test for causal relationships between explanatory variables and employment. For example, there is a debate about the causality between health and employment: Does good health increase labour market participation or does unemployment cause poor health among humanitarian migrants? Reciprocal links between health and employment have also been suggested (e.g., Olesen et al. 2013). Future studies could include other health indicators. For example, the high prevalence of mental health symptoms among Kurdish migrants in Finland (Rask et al. 2016a) or the functional disabilities among Somali migrants (Rask et al. 2016b) may well limit their labour market participation.

Similarly, the relationship between having Finnish friends and employment may be reversed. Employed migrant women may find Finnish friends at their workplaces or through their work, whereas unemployed migrant women may more seldom have social contacts with natives. Longitudinal data are needed to examine the causality between Finnish friends and employment. As migrants' positions in the labour market can be rather unstable and are under a continuous process of change (Krutova, Lipiäinen, and Koistinen 2016), future studies examining the factors related to employment using longitudinal data are important. In addition, all our findings were based on self-reported data, and hence may have been influenced by subjective response bias. In future research, the complementary use of employment and health registers may strengthen the validity of relationship assessments between explanatory factors and outcomes.

Although some caution is needed, we believe that our results may apply to at least some extent to other advanced welfare countries with similar groups of humanitarian migrants and similar types of work life. For instance, migrants from Iran, Irak and Somalia are also among the main migrant groups in Sweden, Norway and Denmark (e.g., Bevelander et al. 2013), and they face similar problems of finding employment in their new host country (e.g., Behtoui et al. 2014; Berggren 2014; Rosholm, Scott, and Husted 2006).

To conclude, this study showed that good health and social relations with natives – i.e., bridging social networks – play a role in increasing opportunities for employment among women with humanitarian backgrounds. At the same time, having under schoolage children limits the labour market participation of female humanitarian migrants. Overall, gender should be taken seriously into account when promoting the employment of humanitarian migrants. In particular, tools for balancing work and family life and increasing social connections with natives should be used in order to enhance women's successful integration into work life.

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