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From A Social And Educational Point Of View

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Abstract

Keywords: migration, remigration, maladjustment, school failure. The adaptation of modern man to the demands of globalization, to economic and social needs, has led to the accentuation of some social phenomena (migration and remigration) in terms of the exodus of part of the population. The latter are seeking economic and social stability for their families. Migration is a sensitive issue of interest to both countries of origin and destination. Remigration of Romanian citizens is a phenomenon that produces more or less predictable social, educational, economic and, especially, individual effects. Many migrants do not achieve their goals, many have negative experiences of migration so that their physical and mental state is affected, but even more return home disillusioned and sometimes traumatized by this experience, many of them being children. The phenomenon of remigration (returning to the country of origin after a failed migration experience) has a strong impact on the well-being and development of the student. The social and school adaptation of the pupil and his/her reintegration into social activities presents, in most cases, major difficulties: low self-esteem, school failure, hyperactivity/attention deficit, social isolation.

Zusammenfasung

Schlüsselworte: Migration, Remigration, Fehlanpassung, Schulversagen Die Anpassung des modernen Menschen an die Erfordernisse der Globalisierung und an die wirtschaftlichen und sozialen Bedürfnisse hat zu einer Verschärfung einiger sozialer Phänomene (Migration und Remigration) im Sinne einer Abwanderung von Teilen der Bevölkerung geführt. Letztere sind auf der Suche nach wirtschaftlicher und sozialer Stabilität für ihre Familien. Migration ist ein sensibles Thema, das sowohl für die Herkunfts- als auch für die Zielländer von Interesse ist. Die Rückwanderung rumänischer Bürger ist ein Phänomen, das mehr oder weniger vorhersehbare soziale, bildungsbezogene, wirtschaftliche und vor allem individuelle Auswirkungen hat. Viele Migranten erreichen ihre Ziele nicht, viele machen negative Migrationserfahrungen, die sich auf ihre körperliche und geistige Verfassung auswirken, aber noch mehr kehren desillusioniert und manchmal traumatisiert von dieser Erfahrung nach Hause zurück, darunter viele Kinder. Das Phänomen der Remigration (Rückkehr in das Herkunftsland nach einer gescheiterten Migrationserfahrung) hat einen starken Einfluss auf das Wohlbefinden und die Entwicklung des Schülers. Die soziale und schulische Anpassung des Schülers und seine Wiedereingliederung in das gesellschaftliche Leben ist in den meisten Fällen mit großen Schwierigkeiten verbunden: geringes Selbstwertgefühl, Schulversagen, Hyperaktivität/Aufmerksamkeitsdefizit, soziale Isolation.

1. Introduction

The phenomenon of remigration or return migration often has negative social and educational consequences. Studies focusing on return migration argue that this process is one of state recovery, arising as a consequence of failed migration.

This phenomenon can be approached from multiple and generalised perspectives (social, educational, demographic, psychological, economic and legal), but also from particular ones, as each family's story is a unique case, as a consequence of its experiences. Thus, some families have interacted positively with the adoptive country and culture, while other families have failed to adapt to the new culture. The impact of this adoption is closely related to the environment in which the family lives and acts differently on each child.

Our study focused on identifying the actual psychological effects experienced by remigrant students as indicated in the teacher questionnaire, the psychological test administered to students, and in professional peer-teacher interactions.

2. Theoretical foundation - Characteristics of remigration

All nations face migration, which is a global phenomenon. With the fall of the communist state in Romania in 1989, there was a massive wave of emigration from the country. This is due to unstable



economic, political and social conditions, which can put psychological pressure on people and drive them to seek a place to live that meets their aspirations.

In recent decades, Romanian migration has undergone major changes because, at first, Romanians were illegal migrants looking for work in Europe, and later they became migrants with legal status. This happened during the legalizations in Italy and Spain in 1998 and 2002(Catalano, 2015). In 1998 and 2002, Italy and Spain passed laws legalising certain categories of foreign workers who were in these countries illegally. These laws were intended to opportunities provide for regularisation and integration of foreign workers who were working in their respective economies but who did not have legal status. These legislative actions have had a significant impact on foreign workers and the companies in which they were implemented. Initially, they emigrated on their own, and then brought their families to the places where they settled. The global economic and political context as well as the individual socio-demographic characteristics of migrants have led to their different experiences in Europe.

In recent years we can see evidence in some communities of the return process of migrant families to their country. The reintegration of returned Romanians is gendered, as men and women who have worked in different fields tend to have different chances of reintegration into the labour market in their region of origin. Camelia Badea (2009) says that the existence of return migration is presented by Cassarino as a phenomenon since the 1960s, but as a theoretical approach only since the 1980s, linking the concept of return migration and the need to theorize it to effects such as: co-development, development of reception and reintegration policies for return migrants. Empirical studies show that the reintegration process in the country of origin is not exactly smooth (Black et al., 2003; Bovenkerk, 1981; Byron and Condon, 1996; Kilic et al., 2009). Migrants often do not have enough information about the changes in the home society (laws, jobs, social or medical benefits, education system), even if communication with the family is intense. The migrant who returns home after a long period of time is no longer the same as the one who left, but also has different expectations from the society that is sending him/her back.

Return, sometimes referred to as remigration (Davids and van Houte, 2008), is seen as the final stage of the migration process, which also includes the stage of preparing/making the decision to migrate and the actual stage of migration or settlement in the country of origin. The term remigration implies the return of the migrant to the country of origin following temporary migration. The consequences of this phenomenon are reflected in multiple fields: education, developmental psychology, family psychosociology, social assistance and protection etc.(Catalano, 2015).

Cassarino (2004) points out that particular attention in the study of return migration should be paid to the preparation process, i.e. the period in which the immigrant mobilizes information, local and transnational social ties, and material resources to reintegrate into his/her country of origin. In general, empirical studies show that the more successful reintegration in the country of origin is, the more the migrant has the chance to participate in the economic and social life of the destination country (Davids and van Houte, 2008). The economic crisis that has hit the whole of Europe is the main reason cited by returned Romanian migrants; many have chosen to return home also because of their children, who have not been able to adapt to the requirements of the host country's education, being faced with early school drop-out or considering that the educational system in our country is more serious and based on discipline. Some migrant children were born abroad and the rest were taken out of the Romanian education system at an early age.

Remigrating to Romania can have long-term effects on different dimensions of the remigrating student's personality and can be felt immediately or after a few years. Those interacting with the remigrant student, the teacher, school counsellor or itinerant teacher will carry out an initial assessment and monitor the student's progress. Reintegration into a new education system is a long process. During the early school years, adaptation and learning are important aspects of the child's life. We believe that physical development is not slowed down, that there are no negative effects on the body; the remigrant parent preserves in his relationship with his children behaviours acquired during the years of migration where he was obliged by the laws of the respective state to take care of his children's health. Possible negative effects of the development of the young school-age pupil we find in socio-emotional development (high level of stress, anxiety disorders, trauma, unhealthy eating). The negative effects of parental remigration can also affect the intellectual development of young school-age pupils through poor learning and behaviour outcomes, poor involvement in school and extracurricular activities.

3. Research methodology - Aim of the study, methodology and results

In carrying out this study we aimed to identify the problems related to the social and educational integration of remigrating pupils in primary school, starting from the premise that remigration can have negative effects on the pupil's behaviour, on his integration in the school and social group. Also, the relationship with teachers and the teaching system may change because it is different from the educational system in the country of adoption. The correlation between the social and psychological effects of remigration and performance levels may vary depending on a number of factors, including individual circumstances, social and cultural context, and how individuals adapt to the remigration process and reintegration in the country of origin. It is important to bear in mind that each person and each situation is unique, so the impact of remigration can vary significantly.

Thus, we formulated a research question:

To what extent do the social and psychological effects of remigration correlate with performance levels?

The sample of subjects consists of 50 remigrant primary school pupils aged 6-10 years old, enrolled in 6 schools in Bistrita-Nasaud county;

The aim of the analysis of the psychological dimension is to determine whether there are significant differences between the remigrant pupils and the other pupils in the class in terms of the development of social skills, the incidence of emotional disorders, disruptive and difficult behaviours, but also to identify disorders such as speech and language disorders, pervasive developmental disorders, learning disabilities and delays in mental development, anxiety disorders, bipolar disorders and depressive disorders.

Since we aimed to provide information on the psychological effects of remigration on students who already had at least one year of educational experience in another education system, we used a survey to obtain a baseline study. In order to make the intended effects significant, we included in our sample those teachers who have remigrant pupils in their care.

In the **methodological system** that was the basis of the pedagogical research we identify the following research methods: questionnaire survey, observation.

The questionnaire survey is a research method used to collect information from a group of

participants using a standardised set of questions or items. This method is used to obtain quantitative or qualitative data about participants' opinions, attitudes, behaviours or characteristics in a systematic way. By and completing questionnaires, distributing researchers can obtain information from a relatively large number of participants in an efficient way. The responses collected can be analysed to identify trends, correlations or patterns, thus providing useful data for understanding different aspects of the topic under investigation. This method can be used in a wide range of fields such as social research, psychology, health, marketing, education and others. However, careful planning of questions, pre-testing and ensuring the representativeness of the sample are important to obtain valid and relevant data.

The observation method is a research technique that involves the careful and systematic observation of a phenomenon, behaviour or event in a given environment, without directly intervening in the subject under study. This method is based on gathering information through direct, non-intrusive observation in order to better understand the behaviours, interactions or characteristics of a subject under study.

The observation method can be used to obtain detailed and authentic data about behaviours and interactions in a natural environment. However, it can have limitations such as the subjectivity of the observer, inability to access certain situations or difficulties in generalising results. Careful planning and objective recording are essential to ensure the validity and relevance of observational data.

As research tools, we used the questionnaire, an instrument that was applied to a sample of exactly 16 primary school teachers who have at least one remigrant pupil in their class and who were interested in this issue, for needs analysis. The questionnaire was administered in partnership with the County School Inspectorate of Bistrita-Nasaud County and 80 primary school teachers from 6 schools participating in the project responded.

We also applied a standardized psychological test, BASC-2, which is a multidimensional and multimethod system used in the assessment of behavior and self-perception for children and young people between the ages of 2 and 25. BASC®-2 assesses a wide range of distinct dimensions. In addition to assessing personality, behavioural problems and emotional disorders, BASC®-2 also identifies positive characteristics that can be used effectively in the intervention and treatment process. The range of dimensions assessed helps in making differential diagnoses for different categories of disorders, such as those included in the Diagnostic and Statistical Manual of Mental Disorders, (DSM-IV-TR, American Psychiatric Association, 2000), but also captures other general categories of problems, such as those included in The Individuals with Disabilities Education Act (IDEA, 1997).

Here are some key features of BASC-2:

1. Purpose: The BASC-2 aims to assess a wide range of behavioral and social-emotional domains, including level of social adjustment, externalizing and internalizing behaviors, symptoms of anxiety or depression, and more.

2. Components: The test is composed of a variety of instruments, including questionnaires for parents, teachers and/or children and adolescents. These questionnaires contain questions on different aspects of behaviour and well-being.

3. Standards and standardisation: BASC-2 was developed and standardised based on a diverse population of children and adolescents. This allows the assessment of the individual in comparison with age and gender appropriate reference groups.

4. Interpretation of results: The test results provide information about the level of competence and difficulties in different behavioural domains. Researchers and clinicians can interpret the scores to gain a deeper understanding of the individual's needs and concerns.

5. Uses: The BASC-2 is used in a variety of contexts, including the assessment and diagnosis of behavioral disorders, intervention planning, and monitoring progress over time.

6. Cultural adaptations: Depending on the country and culture in which it is used, BASC-2 can be adapted to ensure validity and relevance of the assessment.

BASC-2 (Behavior Assessment System for Children, Second Edition) was developed by a group of psychologists and mental health and psychology researchers. Among the important authors and contributors to BASC-2 are Cecil R. Reynolds and Randy W. Kamphaus. These two authors were among the principal developers of BASC-2 (2004), along with a group of collaborators and experts in the field. The development of a standardized psychological test involves extensive research, revisions, and testing to ensure the validity and reliability of the instrument. BASC-2 (Behavior Assessment System for Children, Second Edition) contains several scales and subscales that assess various aspects of children's and adolescents' behavior and well-being. Here is a list of the main scales and subscales in BASC-2:

1. Primary Scales:

• Externalizing Behaviors (Externalizing Problems): Measures externalizing behaviors such as aggression, hyperactivity, and attention problems.

• Internalizing Problems: Assesses internal behaviors such as anxiety, depression, and social adjustment problems.

• School Problems: Assesses school-related problems such as academic difficulties, classroom behaviour, etc.

2. Area Scales: These scales assess specific behaviors in various areas, such as relationships with parents or peers.

- Parent Relations
- Sibling Relationships
- Peer Relations
- Leisure Activities
- Academic Skills
- Social Skills

3. Content Scales: These scales assess specific aspects of behaviour or emotions.

- Depression
- Anxiety
- Anger/Aggression
- Conduct Problems
- Attention Problems
- Hyperactivity

The test has been designed to assess a wide range of behavioural and socio-emotional issues to provide a comprehensive picture of children and adolescents. Results from the different scales and subscales can be interpreted to better understand the individual profile of each participant and to guide appropriate interventions.

The description of the scales for teachers in the BASC-2 is important to ensure proper understanding of the terms and concepts used in the assessment. It helps teachers to complete the questionnaires in an accurate way and to provide relevant information about students' behaviour and well-being. Using clear, accessible language and providing relevant examples are key to ensuring that teachers understand and complete the BASC-2 questionnaires correctly.

Adaptive scales assess children's and adolescents' adaptive skills and positive behaviours. These scales provide insight into individual skills and abilities that can influence their functioning in different environments. Here are some of the adaptive scales in BASC-2:

1. Adaptive Skills - Thinking: This scale assesses cognitive skills such as problem solving, abstract thinking and conceptual understanding.

2. Social Skills (Adaptive Skills - Social Skills): The Social Skills scale assesses the ability to interact with others appropriately, develop relationships and integrate into social groups.

3. Communication Skills (Adaptive Skills -Communication): This scale explores verbal and nonverbal communication skills such as expressing ideas, active listening and effective communication.

4. Adaptive Skills - School Skills: The School Skills scale assesses skills related to academic performance, such as attention to lessons, organisation, time management and learning skills.

5. Work Skills (Adaptive Skills - Functional Communication): This scale explores skills needed for autonomous and independent functioning, such as self-care, work skills and managing daily responsibilities.

Clinical scales are designed to identify possible clinical problems or mental health difficulties in children and adolescents. These scales provide relevant information for assessment and intervention in cases where serious disorders or difficulties may exist. Here are some of the clinical scales in BASC-2:

1. Depression: this scale assesses the presence of symptoms of depression, such as persistent sadness, lack of interest or pleasure in activities, feelings of worthlessness or excessive guilt.

2. Anxiety: the Anxiety Scale explores the level of anxiety and excessive worry. It may cover symptoms such as excessive fear, anxiety, phobias or physical symptoms related to anxiety.

3. Panic Attacks (Panic Disorder): this scale is designed to identify the presence of panic attack symptoms such as feelings of intense fear, palpitations, shortness of breath and other associated symptoms.

4. Attention Problems: the Attention Problems Scale assesses the presence of difficulties in maintaining attention, concentration and hyperactivity. It can help identify symptoms of ADHD.

5. Conduct Problems: this scale assesses the presence of problematic behaviours such as aggression, opposition to authority, non-compliance with rules etc.

6. Motor Concerns: this scale examines concerns related to motor development and motor coordination, such as difficulties in performing physical activities or balance problems.

7. Sleep Disturbances: this scale assesses sleeprelated concerns, including difficulties falling asleep, frequent waking during the night, and other sleep disturbances.

8. Substance Abuse: this scale explores the risk or presence of substance use, such as alcohol or drugs, in children and adolescents.

These are just a few of the clinical scales included in the BASC-2. The purpose of these scales is to provide additional information to identify possible mental health disorders or difficulties in children and adolescents, thus providing a framework for appropriate interventions.

For all scales, T-scores will range from 41-59 in about two-thirds of the general population. T-scores between 60 and above 70 indicate the presence of significant problems, the onset of a mental disorder or the pre-disorder onset of a mental disorder and which, although requiring treatment and/or close monitoring, may not be severe enough to meet the conditions for a formal diagnosis.

Table 1. Adaptative s	scale -T score
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Adaptive scales	Clinical scales -	T-scores
Very high (healthy)	Clinically significant	70 and over 70
High (healthy)	Risky Between	60 - 69
Medium (healthy)	Medium (healthy)	Between 41 - 59
Risk Low (healthy)	Risk Low (healthy)	Between 31 - 40
Clinically significant	Very low (healthy)	30 și sub 30

A similar study was conducted in 2020, entitled Evaluation of adaptation capacity and the importance of communication between children and parents who emigrate (Vasilescu, 2020). This study highlights the degree of adaptability of a teenager in Bucharest, abandoned by one parent and the other who has gone abroad. The research findings affirm the importance of paying special attention to children left at home, taking into account their increased potential, vulnerability and the high probability that certain emotional deficiencies may occur in their development.

4. Results

In this case, we used questionnaires for teachers and pupils. The questionnaire applied to teachers who have remigrant pupils in their classrooms was made up of some identifying data on teaching degree, experience, level of preparation, presence of these pupils in the classroom, followed by a set of openended questions, which aimed at observing some common points, but also some particularities of the Table 2. Results of the study group of case. It should be mentioned that the research methodology has an obvious qualitative underpinning, therefore the results obtained cannot be generalized and attributed to all remigrant students in Romania. In order for the questionnaire to be valid, it was established after a first test on a larger group of teachers, similar to our sample. It must be argued that the research methodology has a clear qualitative and observational underpinning.

Teacher observations of student maladaptive behaviors:

CLINICAL SCALES	Students returning	Pupils returning with both parents	011	Pupils returning
High values above 60, risk values and clinically significant	with a parent Total 15 pupils	Total 24 pupils	staying with grandparents	staying with other relatives
and ennicarry significant	Total 15 pupils	10tal 24 pupils	Total 6 pupils	Total 5 pupils
	Only students with high scores above 60 are graded	Only students with high scores above 60 are graded	Only students with high scores above 60 are graded	Only students with high scores above 60 are graded
Hyperactivity	E1-64	E2 60	E5-66	E9-62
		E3-61	E6-61	E10-64
		E4-65	E7-76	E11-70
			E8-67	E12-72
				E13-69
Aggressiveness			E6-66	E9-60
				E11-65
Conduct problems	E1-61	E4-66		E13-71
Anxiety		E3-61	E5-67	E9-62
		E4-66	E8-70	E11-71
				E13-66
Depression				E12-61
				E14-60
Somatization			E5-73	E13-60
			E6-63	E14-71
			E8-69	
Attention problems	E1-63	E2-60	E5-70	E9-63
	E19-66	E3-67	E6-63	E10-64
		E4-77	E7-77	E11-72
			E8-67	E12-74
				E13-69
Learning problems	E1-71	E2-64	E5-71	E9-63
	E18-72	E4-66	E6-68	E10-65
			E7-77	E11-70
			E8-66	E12-71
				E13-66
Atypicality				E11-66
Social withdrawal	E1-62		E5-77	E11-60

le 2. Results of the study group observations from the tea	cher's perspective
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	E16-70			E14-70
Total students with risk scores on adaptive scales between 60-69	2 students	2 students	3 students	3 students
Total students with clinically significant scores on adaptive scales above 70	2 students (4%)	1 students (2%)	1 students (2%)	3 students (6%)

From teachers' observations, remigrant students with both or one parent are less aggressive, depressed, anxious and atypical than those who have remigrated and live with grandparents or other relatives, but are more hyperactive and therefore have more conduct problems. Also, remigrant students who live with grandparents or other relatives somatise more than those who have returned and live with both parents or only one parent, as noted by their teachers, with somatization being an indicator of diffuse anxiety (a moderate anxiety but maintained over a long period of time). Teachers note that the most cases of maladaptive behaviour are observed in the group of pupils living with grandparents or other relatives. These unresolved cases can lead to school failure. Pupils with the fewest maladaptive behaviours are those who have returned with one or both parents.

Students' perceptions of their maladaptive emotions and behaviours

Clinical scales - child form

Students' perceptions differ greatly from what their teachers observe in them, especially for those identified as having difficult, inappropriate, negative behaviours.

The results of applying the BASC-2 test to the group of students participating in the present case study are presented in the following tables. Risk values on clinical scales are recorded from scores equal to and greater than 60. Risk values for adaptive scales are recorded from scores equal to and less than 40.

CLINICAL SCALES High values above 60, risk values and clinically significant	Students returning with a parent Total 15 pupils Only students with high scores above	Pupils returning with both parents Total 24 pupils Only students with high scores above	ReturningpupilsstayingwithgrandparentsTotal 6 pupilsOnly students withhigh scores above	Pupils returning staying with other relatives Total 5 pupils Only students with high scores above
	60 are graded	60 are graded	60 are graded	60 are graded
Attitude towards school	0	0	0	0
Attitude towards teachers			E20-66	
Atypicality				E25-71
Somatization		E19-61	E21-61	
Aggression				E23-61
Anxiety			E21-62	
Depression				E24-66
Feeling of inefficiency			E20-66	
Attention problems				E26-68
Hyperactivity	E18-70		E20-69	E22-67
			E22-72	E24-70
Total students with risk scores on adaptive scales	-	1 student	2 students	3 students
between	1 student (2%)	1 student (2%)	1 student (2%)	2 students (4%)

Table 3. Results of the study group observations from the student perspective

Students' perceptions differ greatly from what their teachers observe in them, especially for those identified as having difficult, inappropriate, negative behaviours.

The results of applying the BASC-2 test to the group of students participating in the present case study are presented in the following tables. Risk values on clinical scales are recorded from scores equal to and

greater than 60. Risk values for adaptive scales are recorded from scores equal to and less than 40.

All students in the experimental group consider their attitude towards school to be positive, with no problems. In the group of pupils who have remigrated and live with parents or other relatives, 6% of them perceive themselves as having problems related to hyperactivity, locus of control and anxiety, depression and atypicality.

			ſ	[]
CLINICAL	Students returning	Pupils returning	Returning pupils	Pupils returning
SCALES	with a parent	with both parents	staying with	staying with other
High values above	Total 15 pupils	Total 24 pupils	grandparents	relatives
60, risk values and			Total 6 pupils	Total 5 pupils
clinically	Only students with	Only students with	Only students with	Only students with
significant	high scores above	high scores above	high scores above	high scores above 60
-	60 are graded	60 are graded	60 are graded	are graded
Total maladaptive				<u> </u>
behaviours				
Hyperactivity	1	0	2	2
Aggressiveness				1
Conduct problems	0	0	0	0
Anxiety			1	
Attention problems				1
Somatization		1	1	
Learning problems	0	0	0	0
Atypicality				1
Withdrawal	0	0	0	0
	2%	2%	8%	8%

Table 4. BASC-2 test values for students

5. Discussions

All the remigrant students present in our study, manifest several maladaptive behaviors. There is a small difference between those living with one or both parents and those living with grandparents or other relatives. This result may be the subject of another study. In conclusion, we can say that remigrant pupils, as they perceive themselves, have maladaptive behaviours and emotions concerning aggression, anxiety, attention and learning problems, atypicality but in much lower percentages than in the perception of teachers. Among the emotional disorders, the most common among remigrant students were anxiety disorders, but in a small number of cases. Among the 50 children participating in the present case study, 10 children were identified as having emotional and behavioural disorders. Of these, 4 children were identified in the group living with grandparents and 6 children in the group currently living with other relatives. The present case study revealed the existence of several emotional and behavioural

problems in these pupils. Most of the teachers interviewed associated most of the children's aggressive behaviour with permissive parenting and lack of firmness on the part of parents and legal guardians rather than with the children's emotional problems. Learning and conduct problems are often blamed on children's hyperactivity (although none of the 50 children in this case study were diagnosed with ADHD) or on a malicious attitude towards school, peers, teachers and learning in general, when in fact they are associated with depression, attention problems and even some learning difficulties, anxiety and feeling rejected by others (through bullying).

6. Conclusions

Intervention methods for remigrant students with emotional and behavioural problems include psychotherapy, school counselling, participation in remedial education projects and, not least, counselling for parents and legal guardians. Return migration of students to the Romanian education system is a current phenomenon and occurs in a variety of ways

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depending on gender, age and geographical area. The social, emotional and cognitive reintegration of these students depends on the skills they have acquired in their previous years of study, either in the country of study or in the country of adoption, and on how educators, parents and society can address this phenomenon. The school community and parents need to take action to help students with emotional depression, somatisation, dysfunction (anxiety, atypicality and social withdrawal). The school counsellor, teachers and parents or legal guardians of these children will organise counselling and psychotherapy programmes. In order to ensure the sustainability of remigrant integration projects at all levels, it is necessary to focus on the different types of needs and behaviours of migrants returning to school in relation to Romanian educational structures.

The data obtained from the application of the tests and direct observation of the 50 pupils participating in the study answer our research question. The correlation between the social and psychological effects of remigration and performance levels may vary depending on several factors, including individual context, circumstances and reasons for remigration, and resources available for reintegration and adaptation. There is no universal or fixed correlation between these factors. Social changes brought about by remigration, such as reunion with family, reintegration into the community of origin and adaptation to cultural changes can influence a person's level of performance. For example, a supportive social environment and reunification with family members can contribute to increased self-esteem and motivation to perform academically. Psychological well-being can have a significant impact on performance.Students who feel more confident, less anxious and less stressed often have a more effective and focused approach to their goals. At the same time, stress or anxiety related to the remigration process could negatively influence performance.

Remigrating students can experience both positive effects, such as increased performance, and difficulties, such as stress or difficulties in coping. Social support, access to resources and change management approaches can influence how these interactions unfold.

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