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# The impact of migrants' knowledge about their social rights on their subjective wellbeing

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**Introduction:** In this contribution I examine the role of migrants' knowledge about their social rights (system knowledge) for their subjective well-being. Based on the Social Production Function Theory, I expect system knowledge to be positively associated with migrants' well-being. Migrants who are well informed about their social rights are likely to have better access to resources that are crucial for their well-being such as healthcare or financial security. Moreover, I expect that knowledge in certain domains which affect daily life, such as healthcare, matter more than knowledge in other domains, which are life-course specific, such as childcare.

**Methods:** I make use of the Migrants' Welfare State Attitudes (MIFARE) data which includes the perspective on the welfare state of migrants from nine different origin countries across three receiving countries: Denmark, the Netherlands, and Germany. Linear regression analyses were applied.

**Results:** Results indicate that migrants differ extensively in their social rights knowledge. Moreover, migrants' knowledge about their social rights is indeed positively associated with subjective well-being, though the effect is not equally strong in all three receiving countries and differs by welfare domain (healthcare, childcare, unemployment benefits, social assistance, and state pensions).

**Discussion:** Knowledge about social rights matters for migrants' well-being. Policy advisors should therefore pay special attention to migrants' access to information about social right policies in order to increase their well-being.

## KEYWORDS

system knowledge, social rights, wellbeing, migrants, MIFARE, welfare state

## Introduction

European welfare systems are generally designed with the overall goal to reduce inequality within society. However, the extent to which people have access to welfare services and benefits differs tremendously between groups. Particularly first-generation migrants struggle with the navigation through a welfare system which is often unfamiliar to them. Recent studies have focused on this migrant-specific unfamiliarity with host country welfare systems and show that migrants lack knowledge of their social rights regarding a large variety of welfare domains including healthcare, childcare, but also pensions and unemployment security (Renema, 2018; Seibel, 2019). Migrants' lack of such-called "system knowledge" can be problematic for several reasons. For once, system knowledge is crucial to guarantee equal access to welfare state services and benefits. However, the relevance of system knowledge might go beyond its facilitating function in accessing the welfare state; by enabling participation in the welfare state, system knowledge might be a crucial component of migrants' wellbeing within the host society. Beyond that, system knowledge might also positively impact migrants' wellbeing by improving their agency and self-efficacy within the welfare state.

Drawing on the Social Production Function Theory (Ormel et al., 1999) and the Capability Approach (Sen, 1999; Nussbaum, 2011), I provide several theoretical explanations of a potential link between system knowledge and wellbeing among migrant populations. I argue that for migrant wellbeing, it not only matters to what extent migrants are aware of their social rights (hence, the quantity of their system knowledge); migrants' wellbeing might also depend the relevance of certain welfare domains for their general livelihood.

I examine the link between migrants' knowledge of the social rights of people from their country of origin living in the receiving country and their subjective wellbeing among nine different migrant groups (from origin countries USA, UK, Spain, Poland, Romania, Russia, Japan, China, and Turkey) within three receiving countries: Denmark, the Netherlands, and Germany. The focus lies on migrants' knowledge about the conditions under which people from their country of origin are eligible to the *same extent as natives* to access each of the following five social right domains: Healthcare, childcare, unemployment benefits, social assistance, and pension. The comparison to the native population is important as it reflects the extent to which migrants are experiencing civic inclusion of their rights or in other words: the conditions under which the state views migrants as equal to national citizens (Morris, 2002). By focusing on migrant groups that, to a very large extent, possess a residence permit and work permit in the receiving country, this study can be seen as a conservative test of the assumption that knowledge of social rights increases wellbeing. For more vulnerable groups, such as irregular migrants or refugees, knowledge about social rights might be even more important for their wellbeing, given their social position within society which is often characterized by high levels of social and institutional exclusion.

I employ unique data from the project Migrants' Welfare State Attitudes (MIFARE), which is the first representative and cross-national survey containing unique information about first-generation migrants' attitudes and knowledge about the welfare state (Bekhuis et al., 2018). Respondents could answer the survey either on hard-copy or online and additionally choose to answer either in their mother tongue or in the host-country's native language. The sample analyzed in this paper consists of a total of 5,732 first-generation migrants. In the following, I discuss existing literature, relevant theories and derive hypotheses regarding migrants' knowledge of their social rights and its effect on their subjective wellbeing. Thereafter, I present the empirical strategy, followed by the results. A discussion of the findings and implications for migrants' wellbeing concludes the article.

## Background

With migrants constituting an growing part of European populations, their subjective wellbeing has received significant attention over the last years (Liebkind and Jasinskaja-Lahti, 2000; Carswell et al., 2011; Hadjar and Backes, 2013; Hendriks, 2015; Kogan et al., 2018; Heizmann and Böhnke, 2019; Hendriks and Bartram, 2019). Next to individual factors such as education and

income, migrants' access to social rights matters. Comparative research demonstrates that an easier access to social rights, in terms of generous integration and welfare policies, increases migrants' wellbeing (Hadjar and Backes, 2013; Hendriks, 2015; Kogan et al., 2018; Heizmann and Böhnke, 2019). This raises the question to what extent migrants are aware of their social rights. Previous research demonstrates a large variation in knowledge about social rights among migrants (Renema, 2018; Seibel, 2019). Such system knowledge might be equally important in understanding migrants' subjective wellbeing than the actual legal framework shaping migrants' social rights. If knowledge about social rights indeed affects migrants' subjective wellbeing, than integration and welfare policies do not only work by providing "objective conditions" such as improving labor market access (Kogan et al., 2018, p. 1,786); but governments have to secure that these legal frameworks are also known by those who are targeted by such policies.

In this contribution, I examine migrants' knowledge about the conditions of receiving the *same social rights as natives* regarding five different welfare domains: Healthcare, childcare, unemployment benefits, social assistance, and pension. Since natives enjoy the fullest amount of social rights, migrants who receive the same social rights as natives experience full civic inclusion by the government (Morris, 2002). Asking about migrants' knowledge about social rights of the people from their country of origin living in the receiving country, in comparison to the native population, might reveal also another aspect, namely migrants' civic gain within the welfare system. In contrast to civic inclusion, which refers to the formal social rights granted by the government, civic gain depicts the actual realization of these formal rights (Morris, 2002). If migrants perceive their ethnic group as a part of the social policy's target group, they might be more likely to feel accepted and included, which is likely to impact their general wellbeing.

Both, subjective wellbeing as well as knowledge about social rights among migrants can differ between receiving countries as well as migrant groups (Hadjar and Backes, 2013; Renema, 2018; Seibel, 2021).

Social rights granted to migrants are complex, containing several specific regulations for different migrant groups (for example, EU vs. non-EU, salaried employed vs. self-employed, seasonal workers vs. blue-card holders, etc.) (Quinn et al., 2014; Römer et al., 2021). In this paper I focus on regular migrants holding a resident permit who origin either from other EU countries such as from Spain, the UK (still an EU member at the time of the survey), Poland and Romania and migrants from non-EU countries such as the USA, Turkey, Japan, China, and Russia. This project thereby covers both, migrants originating from Western spheres and from East Europe. Among non-EU migrants Turkish migrants are the most studied while other groups are hardly researched. The selection of these countries does not only reflect a variety of socialization in different welfare states, but also a variety of cultures likely to influence both, migrants' knowledge about social rights as well as their subjective wellbeing. Hence, similar to other studies (e.g., Hadjar and Backes, 2013) this paper is able to provide a general overview of migrants' subjective wellbeing while, unlike other studies, controlling for a variety of socialization in different welfare

states and cultures reflected in the origin of different migrant groups.<sup>1</sup>

Also, the three receiving countries Denmark, Germany, and Netherlands differ with regards to the organization of their welfare states. For example, whereas Germany and the Netherlands rely on an insurance-based system to finance healthcare, Denmark's healthcare system is tax-based. However, with regards to migrants' eligibility to access the above mentioned welfare services and benefits, group and country differences are less prevalent. As a common denominator, the large majority of migrants' social rights within the European Union are tied to migrants' residence and work permit. As a consequence, the extent to which migrants enjoy the same social rights as natives largely depends on whether they have such a residence permit and a work permit. Whereas, Denmark, the Netherlands, and Germany differ quite extensively in migrants' possibility to acquire a residence and work permit, they differ little in the consequences of these permits for accessing other social rights. Since 2003, the European Commission has introduced provision of social security adopted at the Union level which grants both EU and non-EU migrants, who hold residence permits, equal treatment to nationals with regards to most social rights<sup>2</sup> (Quinn et al., 2014). This depicts the residence status as a main determinant for migrants to access social rights within the receiving country (Bruzelius, 2019). Next to residence status, the work permit is an important prerequisite for full social right acquisition. In order to receive unemployment benefits, for example, migrants living in one of the three welfare states studied here, must have worked in the residence country for a specific amount of time. With regards to these differences and similarities, all three countries are considered in this research design while taking into account the variety within the statistical models.

As shown in Table 1, only migrants with a work permit (and residence permit) are entitled to access unemployment benefits to the same extent as natives. Childcare and healthcare, on the other hand, is already accessible once migrants registered as resident in the receiving country. Also, social assistance is generally granted to most migrants with residence status. One exception are non-EU migrants in the Netherlands, who must have lived in the country for 5 years before being entitled to social assistance without endangering their residence permit (Vreemdelingenwet, 2020). Also in Germany and Denmark, certain conditions can apply for the access of social assistance. This overview shows migrants access to social benefits and services depends on the welfare domain in question, on their origin (EU vs. non-EU) and between receiving countries (Römer et al., 2021; sources of country policies can be found in Supplementary Table 1).

## The theoretical link: knowledge about social rights and wellbeing

According to Social Production Function Theory (Ormel et al., 1999) "people produce their own wellbeing by trying to optimize achievement of universal goals, within the set of resources and constraints they face" (Ormel et al., 1999, p. 66). People with many resources in terms of, for example, income and education, are more likely to achieve a high level of subjective wellbeing than people with little resources. For migrants, their access to resources is strongly linked to their integration into the host society: The better migrants are integrated into the host society, the larger their pool of resources and the higher their subjective wellbeing (Hadjar and Backes, 2013). Migrants' integration chances are thereby strongly influenced by host countries' social rights which determine the "extent of support, rights, and freedom that the host society grants to the immigrant population" (Söhn, 2013; Kogan et al., 2018; p. 1,786). As described above, the extent to which social rights are granted to migrants depicts the scope of civic inclusion of migrants into the receiving country's welfare state. Migrants who enjoy the same rights as natives experience full civic inclusion (Morris, 2002). In practice this means that migrants have the same opportunities to apply for social assistance, for example, as natives and therefore enjoy the same level of social security. As argued by Hadjar and Backes (2013), full civic inclusion provides the best opportunities for migrant integration and thereby positively impacts their subjective wellbeing.

However, a focus on solely on the existence of de-jure social right policies (Hadjar and Backes, 2013; Hendriks and Bartram, 2016; Kogan et al., 2018; Heizmann and Böhnke, 2019) does not account for the possibility that migrants might differ in their awareness, or knowledge, about these rights. In the Netherlands, for example, over 80 percent of migrants do not possess correct knowledge about the legal conditions under which people from their country of origin living in the Netherlands would be eligible to receive social assistance (Renema, 2018). Also, knowledge about healthcare rights seems to be unevenly distributed among migrant groups in Europe (Seibel, 2019). We need to consider that migrants' actual knowledge and awareness of their social rights constitutes a crucial element of their ability to reach full civic gain within the process of integration (Morris, 2002; Mohr, 2005). In contrast to civic inclusion, which refers to the formal social rights granted by the government, civic gain depicts the actual realization of these formal rights (Morris, 2002). Such a realization of rights depends, among others, on migrants' knowledge of their social rights. Hence, knowledge about social rights is an important element needed to activate the effectiveness of social right policies.

Knowledge about social rights might thereby particularly facilitate migrants' integration chances by enabling them to access specific welfare benefits and services which improve living conditions and allow full participation within the host country society. For example, knowledge of the conditions under which migrants are entitled to use public healthcare is very likely to have a positive influence on migrants' health status, their ability to work, and their wellbeing (Mladovsky et al., 2012; Rechel et al., 2013). Similarly, migrant parents of small children who are familiar with the host-country childcare system might be

1 It should be noted that the very large majority of the nine migrant groups possess a residence permit and work permit within the three receiving countries. Hence, generalizations to more vulnerable groups, such as irregular migrants, refugees, or temporary migrants should be drawn with caution.

2 Exceptions regard for example, non-EU migrants who have been unemployed for longer than six months.

TABLE 1 Same access as natives to social rights for EU and non-EU migrants in Denmark, the Netherlands, and Germany.

	Denmark	Netherlands	Germany
Healthcare	Immediately after registration as resident	Immediately after registration as resident	Immediately after registration as resident
Childcare	Immediately after registration as resident	Immediately after registration as resident	Immediately after registration as resident
Unemployment benefits	After having lived and worked in Denmark for a certain amount of time	After having lived and worked in the Netherlands for a certain amount of time	After having lived and worked in Germany for a certain amount of time
Social assistance	Immediately after registration as resident	Immediately after registration as resident for EU migrants; After lived in the Netherlands for several years for non-EU migrants	Immediately after registration as resident
Pension	After having lived and worked in Denmark for a certain amount of time	After having lived and worked in the Netherlands for a certain amount of time	After having lived and worked in Germany for a certain amount of time

For a full overview of the individual sources, please refer to [Supplementary Table 1](#).

more likely to use formal childcare, which is likely to improve migrant mothers' labor market participation (Boeckmann et al., 2014; Ballarino and Panichella, 2018) and migrant children's host-country language skills (Waldfoegel, 2006; Drange and Telle, 2015; Becker and Schober, 2017). Also, welfare benefits such as unemployment benefits, social assistance, and pensions impact migrants' integration chances by providing a safety-net in insecure times and older age which prevents migrants from isolation, poverty (Sarvimäki and Hämäläinen, 2016) and the risk of taking on precariat work in the informal sector (Sabates-Wheeler and Koettl, 2010). Hence, migrants who possess knowledge about their rights regarding such welfare services are assumed to be better able to provide for their livelihood in times of crisis. Despite the importance of these welfare benefits and services for migrants' integration, studies repeatedly show that migrants make significantly less use of most of their social rights than natives<sup>3</sup> (see, for example, Karoly et al., 2018, for childcare; Rechel et al., 2013 for healthcare; Zorlu, 2013 for unemployment benefits) and that part of this ethnic gap is likely due to migrants' unfamiliarity with the system and their social rights within it.

Following this line of argument, system knowledge can be interpreted as a crucial component of migrants' agency and self-efficacy needed in order to mobilize their social rights. This theoretical consideration goes in line with Sen's capabilities approach (CA) (Sen, 1999), which stresses the importance of agency for people's capability to access resources (Yerkes et al., 2019). System knowledge can work as a facilitator of migrants' agency, by providing the necessary tool to access welfare state's services and benefits. However, system knowledge can also work through an alternative path to increased capability, namely via self-efficacy. Self-efficacy refers to people's confidence to successfully complete a task or goal (Luthans et al., 2000). Migrants might be therefore more likely to access welfare state services and benefits if they believe that they will be successful in doing so. System knowledge can increase migrants' self-efficacy and thereby their chances of equal access to the welfare state. Following the arguments provided above we can hypothesize that:

H1: Migrants' system knowledge is positively associated with their wellbeing.

However, one can argue that the effect of such system knowledge differs depending on the extent to which migrants are affected by these social rights within their daily life. Healthcare, for example, is considered as a fundamental right with the European Union (European Union, 2000). Having the ability to visit doctors in case of sickness and to receive adequate treatment is crucial for people's health and wellbeing. Hence, possessing the knowledge that one is entitled to visit the doctor, independently of whether it is because of a cold or cancer, and to receive predominantly low-cost treatment can have a tremendous effect on migrants' wellbeing (Prilleltensky, 2008). Similarly, unemployment is a general risk most employees face today due to the decreasing numbers of fixed contracts, particularly if these workers have a migration background (Kogan and Shen, 2019). Already the general knowledge of their rights with regards to unemployment benefits can lead to integrative measures such as investing in time- and money consuming language courses instead of immediately entering the low-skilled labor market, which promises quick money but often leads to dead-end jobs. Knowledge about such rights which affect migrants on a more daily basis therefore provide important resources for fulfilling basic physical and social needs, and thus contribute to sound social production functions and thus to the general wellbeing. Other social rights regarding childcare and retirement pensions are very life-course dependent (de Jong and de Valk, 2018; De Jong, 2019) and might be perceived less relevant by the majority of migrants. Hence, I hypothesize that:

H2: Migrants' wellbeing might be most affected by knowledge about social rights regarding their daily life such as healthcare and unemployment benefits (in contrast to pension, and childcare).

## Data and measurements

### Data

To answer my research question I make use of the data from the survey Migrants' Welfare State Attitudes (MIFARE), which was collected in the years 2015/2016 and surveyed 9 different migrant groups plus a respective native control group in three receiving countries: Denmark, the Netherlands, and Germany. Migrants

<sup>3</sup> An exception is migrants' use of social assistance which is on average higher than among the native population (see, for example Zorlu, 2013).

originate from Eastern Europe (Russia, Poland, Rumania), Western Europe (Great Britain, Spain), Asia (Japan, China), Turkey, and USA. All migrants surveyed were born in their country of origin and where 18 years or older at the time the survey was conducted (Bekhuis et al., 2018). In addition, all respondents have been registered as residents in the receiving countries. Refugees or irregular migrants are not included in the data. Representative samples were drawn based on the distribution of these migrant groups within the respective receiving country. Respondents were approached with a written invitation letter containing the questionnaire as well as a link to webpage, where the survey could be filled out online. Moreover, respondents had the choice to answer the questionnaire either in their main language of the origin country or in the main language of the receiving country. This provided all migrants (who were literate at least in the main language of their country of origin) the opportunity to participate in the survey.

As mentioned above, respondents had the opportunity to fill out a written questionnaire (hard copy) or answer the questions online. In all three receiving countries and among all migrant groups, the majority of respondents opted for answering the questionnaire handwritten on the hard copy. An incentive in the form of a gift card for 10 euros was used in order to boost response rates. Since this contribution is interested in migrants' wellbeing and their knowledge about their social rights, natives were dropped from the sample. After list-wise deletion the final sample contains of 5,732 first-generation migrants.

## Measurements

The dependent variable, subjective wellbeing, was measured with the following question “when you take all things together, how happy would you say you are?” with answer categories ranging from 0 (extremely unhappy) to 10 (extremely happy). This question comprises of a measurement of general happiness which combines, both, the cognitive and affective components of wellbeing (Hendriks, 2015).

The independent variable *knowledge social rights* captures the extent to which migrants know about their rights regarding their access to unemployment benefits, social assistance, pension, healthcare, and childcare. For each of these social rights, it was asked: “At which point after arrival do migrants from [country of origin] have the same rights as natives in [host country] to:” a) “use the public healthcare system?”, b) “receive public pension from [host country]?”, c) “receive unemployment benefits from [host country]?”, d) “use the public childcare facilities?”, e) “receive social assistance?”. For each of these items the answer categories contain “after registering as resident in [RC]” (1), “after residing in [RC] for an extended period of time, whether or not they have worked” (2), “only after they have worked and paid taxes and insurances for an extended period of time” (3), “once they have become a [RC] citizen (obtained nationality)” (4), “they will never get the same rights” (5). Which answer is correct depends on the benefit/service in question, the host country, and whether the migrant group is from the European Union or not. Regarding healthcare and childcare, the correct answer is for all three receiving

countries and all migrant groups is “after registering as resident.” Access to social assistance can be read in two ways. The very large majority of migrants in Germany and Denmark, both EU and non-EU, have access to social assistance immediately after registering as residents. In the Netherlands, non-EU migrants have to have lived for 5 years in the Netherlands before being eligible for social assistance. However, the German and Danish law has a specific regulation that can also indicate the second answer (after residing in [RC] for an extended period of time, whether or not they have worked) as correct. In Germany, the condition for access to social assistance is conditioned by an intention to stay for a longer period in Germany and not solely for the reason to acquire social assistance (“habitual residence,” see Bruzelius, 2019). However, this regulation most likely does not affect the majority of migrants living in Germany and for that reason one could also argue that respondents answering with the first answer category are also correct. In Denmark, a new legislation implemented in 2015 requires for a 7 year residency (of the last 8 years) which is similar to the Dutch legislation. However, since the survey was collected in 2015 I expect most respondents base their knowledge on previous legislations. For that reason, the main analysis refers to the following coding: For Germany and Denmark, answer category 1 is correct, for the Netherlands answer category 2. However, I also estimated all models with allowing both, answer category 1 and 2 as correct as a robustness check (see [Supplementary Table 6](#)). The regulations for unemployment benefits and pensions are again equal within all three receiving countries and for all migrant groups: migrants must have worked paid taxes and insurances for an extended period of time in the receiving country.

Each item was recoded into a dichotomous variable with “not provided correct answer” (0) and “provided correct answer” (1). Finally, the variable “total knowledge” was created by taking the share of correctly provided answers to these five questions, thereby capturing the extent of knowledge migrants possess about their social rights.

## Control variables

Human capital factors such as *Education, employment, language skills and income* positively impact both, knowledge about social rights (Berry and Hou, 2016; Renema and Lubbers, 2019) and wellbeing (Hadjar and Backes, 2013). Education was measured by the highest educational level achieved (either in the country of origin or receiving country). The answer categories vary between origin groups as educational systems differ between countries. Following standardized international surveys such as the ISSP, responses were therefore recoded according to the ISCED-97 scale and vary from “no formal education [ISCED 0]” (0) to “upper tertiary education [ISCED 6]” (6). I regrouped the variable into three categories: “Low level education—ISCED 0-2” (1), “medium level education—ISCED 3-4” (2), and “high level education—ISCED 5-6” (3). Employment is a binary variable with two outcomes: employed (1) and not employed (0).

Respondents also had to report their ability to both write and speak the receiving country's language, from “very well” (1) to “not at all” (5). I reversed the scale and took the mean of both measures,

hence the higher the value the better the *subjective language skills* of the respondent.

*Household income* after tax and compulsory deductions, was measured on a scale between 1 and 11 (resembling the wave 2008 of the ISSP's family income variable), with 1 indicating an income of <600€/4.500 Danish kroner and 11 an income of 5.000€/37.300 Danish kroner or more per month.

Because the meaning of household income depends on the number of household members and their age, I also estimated the *equivalent household size* following the OECD-modified equivalence scale. This scale values a 1 to the first household member aged 14 years or older; a value of 0.5 is attributed to any additional household member aged 14 years or older; finally a value of 0.3 is attributed to each child under the age of 14 living in the household. A direct measurement of the equivalent household income using this household size measurement is not possible, unfortunately, since household income was only measured in categories.

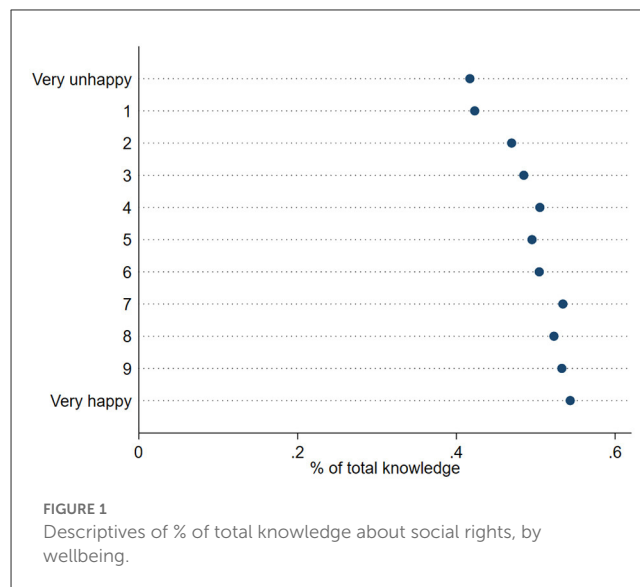
Also, social relations matter for people's wellbeing. For migrants, particularly contact to the native population has been found to increase their sense of belonging and therefore their wellbeing (Correa-Velez et al., 2010). *Contact to natives* was measured by asking respondents about the share of native friends in the host country via the question "Please think about all friends you have who live in [host country]. We would like to know how many friends who live in [host country] are originally from [host country]?" Answer categories ranged from "all" (1) to "none" (5). I reversed the scale so that a higher number indicates a higher share of native friends. Respondents were also asked about their *sense of belonging* to native people living in the host country. Answer categories ranged from "not at all" (1) to "very close" (5).

The models also control for other factors linked to wellbeing such as subjective health status ["very good" (1) to "very bad" (5)] and age (Hadjar and Backes, 2013; Steptoe et al., 2015), gender [male (0), female (1)] (Hadjar and Backes, 2013; Meisenberg and Woodley, 2015). Because research shows that migrants' wellbeing decreases over time (Erlinghagen, 2011; Mähönen et al., 2013), length of stay (in years) in the host country is added to the model.

Last, but not least the models control for all nine migrant groups and the three receiving countries. Chi<sup>2</sup> tests indicate that migrant groups indeed differ significantly in their knowledge about social rights; this holds for all three receiving countries [Pearson chi<sup>2</sup>(45)<sub>Germany</sub> = 294,23,  $p < 0.000$ ; Pearson chi<sup>2</sup>(45)<sub>TheNetherlands</sub> = 197,99,  $p < 0.000$ ; Pearson chi<sup>2</sup>(40)<sub>Denmark</sub> = 102,56,  $p < 0.000$ ].

## Results

Figure 1 shows the overall distribution of wellbeing and knowledge about social rights. We see that migrants who gave the correct answer to only 40 percent of the knowledge questions score very low on the wellbeing scale ranging from 0 to 10. Migrants, on the other hand, who know between 50 and 60 percent of the answers score very high on the wellbeing scale.



In a second step, multivariate regression analyses were used in order to assess the impact of migrants' knowledge about their social rights on their subjective wellbeing (Table 2, non-standardized coefficients,  $p$ -values presented in parentheses). The first model (model A) tests whether an increase in knowledge about social rights is associated with higher levels of subjective wellbeing. Migrants were asked about their knowledge about five welfare domains: healthcare, childcare, unemployment benefits, social assistance, and pensions. Migrants who provided the correct answer to all five knowledge questions are expected to perceive 100 percent knowledge within these domains, migrants who could, for example, provide only one correct answer are expected to possess knowledge of only 20 percent of these welfare domains.

Model A therefore depicts a positive and significant effect of the total share of knowledge ( $b = 0.232$ ,  $p = 0.026$ ). Hence, the more knowledge migrants possess about their social rights, the higher their subjective wellbeing. This supports the general notion of this contribution, that migrants' wellbeing is not only dependent on the legal factors and de-jure access to social rights; it also matters that migrants are actually aware of these rights. Moreover, the data suggests that it is not enough to possess knowledge about just one welfare dimension, but that a broad knowledge of several welfare dimensions is relevant to increase migrants' wellbeing.

Whereas, model A focuses on the quantity of knowledge, the following models (B-G) differentiate between the different welfare dimensions. I hypothesized that for migrants' wellbeing it might be more relevant to possess knowledge about social rights which affect their daily life or which serve as a very important safety net such as healthcare rights and unemployment benefits. The following models therefore estimate the effects of migrants' knowledge about each of the following social rights: healthcare, childcare, unemployment benefits, social assistance, and pensions. Model B shows that indeed, knowledge about healthcare rights significantly increases migrants' subjective wellbeing by 0.119 units ( $p = 0.048$ ). Similarly, knowledge about unemployment rights and pensions increase wellbeing significantly by 0.111 ( $p = 0.044$ ) and 0.127 ( $p = 0.011$ ) units, respectively. Knowledge, about childcare

TABLE 2 Linear regressions: impact of knowledge of social rights on subjective-wellbeing (beta-coefficient; standard error in parentheses).

	Model A	Model B	Model C	Model D	Model E	Model F	Model G
Share total knowledge	0.232* (0.028)						
Knowledge healthcare		0.119* (0.049)					0.148* (0.022)
Knowledge childcare			-0.007 (0.891)				-0.041 (0.447)
Knowledge unemployment benefits				0.111* (0.044)			0.070 (0.227)
Knowledge social assistance					-0.053 (0.332)		-0.042 (0.452)
Knowledge pension						0.127* (0.011)	0.104* (0.047)
<b>Controls</b>							
Level of education	-0.032 (0.117)	-0.031 (0.126)	-0.030 (0.147)	-0.031 (0.129)	-0.029 (0.150)	-0.030 (0.147)	-0.031 (0.125)
Income	0.135*** (0.000)	0.135*** (0.000)	0.136*** (0.000)	0.135*** (0.000)	0.136*** (0.000)	0.136*** (0.000)	0.134*** (0.000)
Equivalized household size	0.013 (0.781)	0.017 (0.710)	0.019 (0.669)	0.018 (0.698)	0.020 (0.665)	0.018 (0.694)	0.019 (0.683)
Employed	-0.089 (0.104)	-0.084 (0.126)	-0.085 (0.120)	-0.091+ (0.096)	-0.086 (0.115)	-0.096+ (0.080)	-0.098+ (0.074)
Language skills	-0.058* (0.033)	-0.057* (0.035)	-0.053* (0.049)	-0.057* (0.034)	-0.053* (0.049)	-0.053* (0.048)	-0.059* (0.029)
Share of native friends	0.101*** (0.001)	0.101*** (0.000)	0.102*** (0.000)	0.102*** (0.000)	0.102*** (0.000)	0.099*** (0.001)	0.100*** (0.001)
Belonging to RC	0.326*** (0.000)	0.326*** (0.000)	0.325*** (0.000)	0.325*** (0.000)	0.325*** (0.000)	0.328*** (0.000)	0.328*** (0.000)
Health status	0.563*** (0.000)	0.565*** (0.000)	0.565*** (0.000)	0.564*** (0.000)	0.565*** (0.000)	0.563*** (0.000)	0.563*** (0.000)
Gender: female	0.116* (0.018)	0.116* (0.018)	0.119* (0.015)	0.116* (0.018)	0.120* (0.015)	0.122* (0.013)	0.118* (0.016)
Age	-0.002 (0.502)	-0.002 (0.506)	-0.002 (0.482)	-0.002 (0.428)	-0.002 (0.472)	-0.002 (0.557)	-0.002 (0.531)
Length of stay in years	0.001 (0.826)	0.001 (0.793)	0.001 (0.807)	0.001 (0.815)	0.001 (0.781)	0.001 (0.761)	0.001 (0.722)
Migrant group: Japan	ref.	ref.	ref.	ref.	ref.	ref.	ref.
China	-0.348*** (0.000)	-0.349*** (0.000)	-0.361*** (0.000)	-0.353*** (0.000)	-0.360*** (0.000)	-0.355*** (0.000)	-0.338*** (0.000)
Poland	-0.561*** (0.000)	-0.538*** (0.000)	-0.553*** (0.000)	-0.558*** (0.000)	-0.544*** (0.000)	-0.568*** (0.000)	-0.546*** (0.000)
Russia	-0.087 (0.373)	-0.101 (0.300)	-0.092 (0.345)	-0.071 (0.469)	-0.093 (0.343)	-0.071 (0.466)	-0.064 (0.513)
Spain	-0.333*** (0.000)	-0.320*** (0.000)	-0.325*** (0.000)	-0.329*** (0.000)	-0.319*** (0.000)	-0.338*** (0.000)	-0.329*** (0.000)
Great Britain	-0.361*** (0.000)	-0.362*** (0.000)	-0.356*** (0.000)	-0.342*** (0.000)	-0.347*** (0.000)	-0.369*** (0.000)	-0.362*** (0.000)
Turkey	-0.730*** (0.000)	-0.744*** (0.000)	-0.740*** (0.000)	-0.724*** (0.000)	-0.740*** (0.000)	-0.721*** (0.000)	-0.718*** (0.000)
Romania	-0.110 (0.263)	-0.104 (0.291)	-0.101 (0.302)	-0.106 (0.281)	-0.100 (0.310)	-0.115 (0.243)	-0.117 (0.233)
USA	-0.460*** (0.000)	-0.464*** (0.000)	-0.466*** (0.000)	-0.456*** (0.000)	-0.465*** (0.000)	-0.471*** (0.000)	-0.464*** (0.000)
Host country: Denmark	Ref.	Ref.	Ref.	Ref.	Ref.	Ref.	Ref.
The Netherlands	0.214*** (0.000)	0.209*** (0.000)	0.197*** (0.000)	0.205*** (0.000)	0.196*** (0.000)	0.203*** (0.000)	0.215*** (0.000)
Germany	0.245*** (0.000)	0.260*** (0.000)	0.231*** (0.000)	0.235*** (0.000)	0.230*** (0.000)	0.213*** (0.000)	0.246*** (0.000)
N	5,732	5,732	5,732	5,732	5,732	5,732	5,732
R <sup>2</sup>	0.178	0.177	0.177	0.177	0.177	0.178	0.178

+p < 0.10, \*p < 0.05, \*\*p < 0.01, \*\*\*p < 0.001.

rights and social assistance, however, does not affect migrants' subjective wellbeing positively. On the contrary, knowledge in these dimensions even lowers the odds of higher wellbeing, though the effects are not significant. The last model (model G) includes all factors of interest. We observe, that whereas the effect of healthcare knowledge ( $b = 0.148, p = 0.023$ ) remain significant, the effects of knowledge about unemployment and pension rights decrease and become insignificant. This is partly due to the strong correlation between migrants' knowledge about unemployment benefits and pension rights (person's correlation = 0.47). Both benefits are tied to individuals' employment status and it is likely that people getting acquainted with their unemployment benefits are also more likely to assess information about their pension benefits (or vice versa).

Before making a final conclusion about the specific hypotheses, each model was also estimated separately for the three receiving countries Denmark, the Netherlands and Germany (see [Supplementary Tables 3–5](#)). Results vary depending on country context. First, we see that the total share of knowledge is only significant for the Netherlands, but not for Germany and Denmark. This suggests that institutional differences, potentially in implementing migrants' social rights, might influence the relationship between knowledge and wellbeing. It also means that the first hypothesis is only true for the Netherlands. However, this does not mean that in the other countries knowledge about social rights does not matter for migrants' wellbeing, at least not for Denmark. In Denmark, migrants who know about their rights with regards to healthcare are significantly more happy than migrants who do not know about their healthcare rights. However, knowledge about the other welfare domains does not matter in the Danish context and might also explain, why the effect of total knowledge is not significant. Knowledge about healthcare rights is simply not strong enough to drive this main effect. In Germany, knowledge about social rights does not matter at all for migrants' wellbeing, independently of the welfare domain. Hence, there is not enough support for a general mechanism assumed in hypothesis 2. While in the main model, with all three receiving countries, knowledge about healthcare and unemployment benefits indeed matter for wellbeing, while knowledge about childcare and social assistance does not (as assumed in hypothesis 2) this is not the case for every country. Rather, healthcare knowledge is more important in Denmark, whereas knowledge about unemployment benefits is relevant in the Netherlands. In addition, in the Netherlands, wellbeing is also associated with knowledge about state pensions, which contradicts hypothesis 2.

## Robustness checks

Several additional analyses were conducted in order to test the robustness of the results presented above. A relevant argument provided by [de Jong and de Valk \(2018\)](#) is that certain welfare benefits and services are mainly relevant within specific phases within the life course. One could therefore also assume that certain life-course events influence the effect of knowledge about specific certain social rights on wellbeing. For most migrants (and natives), the issue of childcare, for example, becomes only relevant once they become parents themselves. Similarly, the issue of pension

security might be more relevant for older migrants than for younger migrants. I therefore tested two additional models with estimating interaction effects between childcare knowledge and having small children and between pension knowledge and age (not presented here). Knowledge about childcare rights remains insignificant, also for parents of small children. Knowledge of pension rights, however, loses its impact on migrants' subjective wellbeing the older migrants become. This is an interesting finding as it contradicts the initial assumption, that pension knowledge might be particularly important for older migrants who are at a higher risk of relying on their pension. One explanation could be that whereas younger migrants view the comparatively generous pension systems within Denmark, the Netherlands, and Germany as positive, older migrants are often also confronted with the fact that their pension is comparably lower than that of natives (due to lower contributions throughout their life course). In this case, knowledge about pension rights can even have a negative impact on older migrants' wellbeing.

Further, in accordance with other studies, I find that whereas household income increases migrants' subjective wellbeing, education and language skills decrease migrants' wellbeing (though the effects are not significant in each model). This might seem counterintuitive at first as one could think of education and communication being key to wellbeing; however, literature on the integration-paradox also finds that particularly well-integrated migrants often do feel less included, exactly because their human capital leads to lower perceived acceptance and higher perceived group discrimination, both detrimental to migrants' wellbeing ([ten Teije et al., 2013](#)). In order to exclude any confounding effect of language skills and education on the relationship between knowledge and wellbeing, I also estimated the models without these human capital factors. However, the main relationship between knowledge and wellbeing hardly changes.

A strong feeling of belonging with the native population and a higher share of native friends indeed increases migrants' wellbeing. Also, migrant women are significantly happier than migrant men and better health is also associated with higher levels of subjective wellbeing, findings consistent with previous research ([Hadjar and Backes, 2013](#); [Kogan and Shen, 2019](#)). Age and length of stay, however, do not have a significant effect on migrants' wellbeing. We also observe strong differences between migrants' origin groups: Compared to migrants from Japan, all other migrant groups are significantly less happy though the effect is not significant for migrants from Russia and Romania. One explanation could be found in the Japanese culture of Buddhism and Shinto which are both associated with high levels of wellbeing. However, this would not explain the large difference to migrants from China who follow similar religious beliefs.

Last but not least, all models were estimated with an adjusted measurement of knowledge of access to social assistance, where for Germany and Denmark, the first answer categories were coded as correct ([Supplementary Table 6](#), see explanation above). These results still show a significant effect of total knowledge on wellbeing, however in smaller size and less significant ( $b = 0.194, p = 0.058$ ) than in the model with the original measurement of knowledge about access social assistance ( $b = 0.232, p = 0.026$ ). Interestingly, the coefficient is negative, though not significant. With reference to the alternative measurement that also values access to social



assistance as valid if migrants have lived in the receiving country for a longer period of time, this finding could also be interpreted that migrants' awareness of the restrictiveness of this policy, particularly in comparison to the native case, lead to a perception of unfairness.

## Conclusion

Previous research has emphasized the importance of integration and welfare policies for migrants' subjective wellbeing, implicitly assuming that migrants possess knowledge of given policies and their social rights, which facilitate or hinder their integration (Hadjar and Backes, 2013; Hendriks and Bartram, 2016; Kogan et al., 2018; Heizmann and Böhnke, 2019). In this study I test to what extent migrants are actually aware of their social rights and whether this knowledge influences their subjective wellbeing. Based on the Social Production Function Theory (Ormel et al., 1999) and the Capabilities Approach (Sen, 1999) I hypothesized that knowledge about social rights, so-called "system knowledge" is positively associated with migrants' subjective wellbeing. In addition, I expected that knowledge in domains that affect migrants daily life such as healthcare is more important than knowledge in domains that are only relevant for certain groups (e.g., childcare).

I make use of the recent MIFARE data (Migrants' Welfare State Attitudes) which covers nine different migrant groups in three receiving countries (Denmark, the Netherlands, and Germany), providing novel information on migrants' subjective wellbeing and knowledge about five social rights dimensions: healthcare, childcare, unemployment benefits, social assistance, and pensions (Bekhuis et al., 2018). First results indicate that indeed, the more migrants know about their social rights, the higher their subjective wellbeing. However, further analyses reveal that this is only the case for Denmark and not for the Netherlands and Germany. I also find that particularly knowledge about healthcare, unemployment benefits and pensions are relevant for migrants' wellbeing. However, again, the country differences were found. While in Denmark, knowledge about healthcare rights is relevant, in the Netherlands knowledge about unemployment benefits and state pensions is crucial for migrants' wellbeing. Interestingly, in Germany knowledge about social rights is not relevant at all, independently of the welfare domain. Knowledge about childcare rights and social assistance, however, does not appear to be relevant for migrants' subjective wellbeing in any of the three receiving countries. Social assistance is only relevant for small minority of migrants and similarly, childcare affects mainly migrants in specific life-situations, but might be less considered as crucial for general social protection.

For now, we can conclude the following: For policy makers these results implies that migrants' wellbeing is not only depended on their access to social rights, but that governments should also invest in facilitating migrants' knowledge about their social rights. However, it depends on the receiving country, on which welfare domain the focus should be. Further research should investigate the reasons for these country differences. For example, one reason why knowledge about healthcare rights matters in

Denmark, but not in the Netherlands, could be that migrants' healthcare coverage and access to healthcare services is better in the Netherlands than in Denmark (MIPEX, 2020), not only in terms of regulations (as discussed in Table 1), but also with regards to implementation. Hence, in Denmark knowledge about healthcare rights might be more important to navigate the healthcare system than in the Netherlands. Similar mechanisms might be at play with regards to unemployment benefits or state pensions, which need further attention.

Nevertheless, this study contributes to the existing literature by showing that, next to the inclusiveness and exclusiveness of existing social right policies, it is important to take into account that migrants differ in their knowledge about these social rights and that this impacts their wellbeing significantly. Policy advisors should therefore pay attention to migrants' access to information about regulations and social right policies which might affect their integration chances and thereby their wellbeing.

Of course, this study also faces some limitations. The cross-national structure of the data leave only room for assumptions about potential causal effects. It is also likely that migrants with a high level of wellbeing are better able to make the effort to acquire knowledge about their social rights. While previous research and the theory provides convincing arguments for the relation assumed in this paper, namely that knowledge affects wellbeing, the causality can only be confirmed with longitudinal data. Similarly, the research design covers three receiving countries (Denmark, Germany, and the Netherlands) that are considerable inclusive with regards to the social rights granted to immigrants. It would be very interesting to study the same research question within restrictive welfare states in order to examine if knowledge of excluding welfare policies (e.g., limited access to healthcare or unemployment benefits) might actually lower the subjective wellbeing of immigrants since it reflects awareness of exclusion and not inclusion. In addition, the data does not reveal migrants' sources of information about knowledge rights. This would be necessary in order to assess which channels (e.g., informal vs. formal) are most important to spread knowledge over migrants' social rights among migrant communities. Moreover, as this article provides a first overview of the effect of knowledge on migrants' subjective wellbeing, no further differentiation between different migrant groups (for example, EU vs. non-EU migrants) was made. There is good reason to believe that EU and non-EU migrants, for example, react differently to the social rights they are granted. Similarly, this study does not take into account the most vulnerable groups such as refugees or undocumented migrants, for whom knowledge about their social rights might be particularly relevant. I therefore encourage further research to look at these group differences in more detail. Last, but not least the robustness checks show that the effect of knowledge of social rights differs strongly between receiving countries. Future research should therefore take variation of policy implementations across countries into account, when examining the impact of system knowledge on migrants' wellbeing. Future research should also take into consideration that for migrants' wellbeing not only knowledge might matter, but also if their lack of knowledge means an overestimation of their social rights or an underestimation.

For example, migrants who perceive unemployment benefits as more accessible than their actually are, might express higher wellbeing than migrants who believe that their social rights are more restricted than they actually are. Still, this study is one of the first contributions showing that knowledge about social rights is crucial for migrants' wellbeing and that policy makers should take into account how they communicate policy regulations to migrant populations.

## Data availability statement

Publicly available datasets were analyzed in this study. This data can be found here: <https://easy.dans.knaw.nl/ui/datasets/id/easy-dataset:97037>.

## Ethics statement

The study was reviewed and approved by Utrecht University. Written informed consent for participation was not required for this study in accordance with the national legislation and the institutional requirements.

## Author contributions

VS is the sole author of this article. She has participated in the data collection, written the introduction, theory section, data and methods section, results and conclusion, and conducted all statistical analyses.

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## Conflict of interest

The author declares that the research was conducted in the absence of any commercial or financial relationships that could be construed as a potential conflict of interest.

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## Supplementary material

The Supplementary Material for this article can be found online at: <https://www.frontiersin.org/articles/10.3389/fpos.2023.1067258/full#supplementary-material>

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