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Editorial

Sustaining family and mental health in contemporary societies underscores the point that there is a troubling storm within families. To sustain a healthy family, there must be a healthy family. There is something to sustain. Studies have shown that unresolved challenges in families inevitably lead to stress and mental health issues. They analyse how unstable families lose their social and health balance, whose consequences snowball into individual, family, and societal life. Based on the challenges that confront the family, this volume devotes itself to exploring the causes, dimensions, challenges, effects, and potential panaceas to the increasing ill-health in families across different spaces.

Sajo opens this volume with a critical evaluation of how mental health could be sustained in families in contemporary times. He argues that family mental health is integral to societal well-being. Contemporary pressures demand that families actively cultivate resilience, supportive relationships, and adaptive coping mechanisms. Policymakers, religious organisations, and health institutions must partner with families to reduce stigma, provide resources, and foster environments where families thrive.

The second article by Harold examines the critical intersection between psychology and evangelicalism, drawing biblical normativity and theological resources to establish the place of Christ in the redemptive work. He avers that evangelicalism and psychology are becoming increasingly relevant and effective in helping counselees grow both spiritually and emotionally by acknowledging their Christian values and assisting them in understanding their emotional pain and social issues. The paper offers counsellors and psychologists a Christian worldview rooted in the Evangelical tradition, serving as a framework to support and guide counselees

when they bring religious experiences and concerns into therapy and counselling. Following this is Ayokunle's article, which argues that there is a connection between migration and mental health. For Ayokunle, as humans migrate from place to place, they either encounter health issues in their host communities or carry health challenges. Thus, migrants should have access to information about their health status and the places they migrate to.

On their own, Gire and Oladapo explore the complexities of family mental health and well-being in contemporary society. They argue that despite the scientific and technological advances the world has made, along with all its challenges, biblical principles remain relevant to addressing them. The vagaries of contemporary life are the subject of biblical contemplation. Audu and his colleagues conducted an empirical study to investigate the correlation between poverty and family mental health in Ayingba, central Nigeria. They argue that poverty results in social stigma, which in turn causes mental ill-health. They submit that addressing the viscerogenic needs of the family is a catalyst for sustaining family health. Irewole and Femi-Bamidele further develop this argument by asserting that the effects of poverty on a family cannot be overstated. They conclude that addressing poverty in families will lead to a healthy family life in all ramifications.

Onuchukwu argues that choosing the right marriage partner is fundamental to achieving and sustaining family mental health. A wrong spouse, he argues, would instigate stress and problems that would undermine a family's mental health. He therefore suggests that emotions and physical attractions are not the fundamental values for choosing a spouse; spiritual guidance would be needed to complement them. Bolaji and Balogun argue for the place of children in mainstreaming mental health in a family. They believe that godly children are critical assets to family mental health; thus, guiding them properly and biblically will help them to perform their designated roles in the family. Agboifo further explores the place of

children in the family and their correlation with mental health. Since dysfunctional families could produce unadjusted children, he recommends that the services of pastoral caregivers are crucial in turning the tide around. Closely knitted to Agboifo's view is Babalola's, who vigorously argued that pastoral care and counselling are all too important to maintain and sustain family mental health. Pastoral intervention in stressed families can help restore trust and love, and heal the entire family, he submitted. Ibrahim also follows this trajectory of pastoral care-giving as indispensable to addressing family challenges. He highlighted the causes of family mental health challenges and suggested that bible-based pastoral counselling can serve as a worthy intervention. Oyewole also argued along this line that family health challenges can be addressed through informed pastoral care-giving in addition to other socially approved measures. For Rhodolf, the nexus between family system theory and its implications for mental health and well-being within the Ghanaian socio-cultural context cannot be overemphasised. He advocated for a family-centred, contextually grounded approach, calling for integrated pastoral and psychosocial frameworks that reinforce family systems, mitigate stigma, and promote sustainable mental health interventions within Ghanaian society.

These articles explored critical areas of family mental health and proffer intellectual, spiritual, and practical solutions that can mitigate the challenges. While welcoming you to savour these interesting articulations of ideas, it is essential to acknowledge that the contributors are responsible for the accuracy of the ideas in their articles.

Benson O. Igboin
Editor-in-Chief

AN AFRICAN CHRISTIAN APPROACH TO MIGRATION AND MENTAL HEALTH

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Abstract

This paper explores the relationship between the phenomenon of migration and mental health, presenting an African Christian approach to handling the migration experience and its attendant challenges. Of course, migration has never been strange to the human experience. People have always had a reason to move from one place to another, whether voluntarily or forced. However, the multidirectional nature and volume of migration today, especially international people movement, is unprecedented. Despite border restrictions and other immigration controls, the unmatched level of globalisation today has necessitated different forms of exchanges and interdependences among countries. However, whether people relocate through regular or irregular channels, the entire migration process can be physically and mentally exhausting. While the physical demands can sometimes be obvious and anticipated, migrants are often not well-prepared for the mental health stresses they may encounter throughout the migration journey, from pre-departure to the post-migration or return phase. Therefore, this work not only evaluates the effect of migration on migrants' mental health but also provides tips for surviving the multi-layered challenges from an African Christian lens.

Introduction

The phenomenon of migration is not new to the human story, since there have always been interactions, trades, and exchanges among people and cultures (Walls, 2017, p. 49). In other words, for “as long as human beings have inhabited the planet, relocation, displacement, and population transfers have marked the human condition” (Hanciles, 2008, p. 139). The 2024 World Migration Report of the UN's International Organisation for Migration reveals that, although most people remain in their country of birth, with only one in thirty migrating, there were 281 million international migrants globally in 2020—about 3.6 per cent of the world population. This figure triples the estimated number in 1970 and 128 million over the 1990 record, affirming the massiveness of the current international migration trend and that migration is a difficult-to-suppress human tendency (International Organisation for Migration, 2024).

This paper finds a conversation like this, which highlights the intersection of migration and health, very apt today, considering that “the current magnitude of globalisation is unprecedented and yet still expanding rapidly” (Mittelman & Hanaway, 2012, p. 5). While globalisation refers to “a state of the world involving networks of interdependence at multi-continental distances” (Keohane & Nye, 2020), migration is one of its driving forces, in addition to the circulation of ideas, information, money, goods, and other influences (Mittelman & Hanaway, 2012, p. 5). So, it is fair to say that, with the unprecedented increase in globalisation comes a rise in the volume of multidirectional migration.

Of course, the impact of migration goes beyond just population numbers, and this article helps to highlight one of the multiple implications of the large international people movement: the mental health dimension. Indeed, with migration comes both opportunities and the multifaceted adaptive challenges of relocating to a *strange* land (Kugbeadjor & Kwiyani, 2016). Adaptive challenges refer to convoluted problems that lack clear definitions

and straightforward solutions, typically requiring a fresh set or recombination of skills and approaches to address, as they are often unfamiliar (Northouse, 2019, p. 262). Again, migrants are exposed to “multiple stresses that can impact their mental well-being, including the loss of cultural norms, religious customs, and social support systems, adjustment to a new culture and changes in identity and concept of self” (Bhugra& Becker, 2005, p. 18).

In exploring the relationship between international migration and mental health, this paper begins with a brief overview of migration, highlighting its various stages to lay a foundation for understanding how the phenomenon affects migrants' health, particularly their mental health. Before presenting some concluding thoughts, the essay's second part discusses, from an African Christian perspective, some recommendations for those who may need to migrate, whether by choice or compulsion.

Migration in Brief

Migration is broadly defined as “the process of going from one country, region or place of residence to settle in another” (Bhugra& Becker, 2005, 18). This movement of people can be collective and massive or individual. Various push and pull factors are responsible for migration, ranging from climate change and natural disasters, to man-made disasters, wars, and other forms of violence and persecution, as well as further education, employment opportunities, marriage, and other reasons (UN-Habitat, 4). Migration can be either voluntary, as with individuals who migrate to pursue further education, or involuntary, as with refugees and others who are forced to relocate due to religious persecution, a threat to life, or other compelling factors. Some migrants move to settle permanently elsewhere, and others relocate temporarily, hoping to return within a period.

Phases of Migration

Migration occurs in three to four major stages: the pre-departure or pre-migration phase, migration or transit, post-migration, and/or return. It is worth noting that these stages in the migration process are not typically distinct but rather flow into one another. The first aspect, pre-departure, encompasses all the preliminary efforts leading up to departure. It captures the decision to move and all the planning and preparations necessary for the relocation and arrival at the other end (Bhugra& Becker, 2005, p. 19). Sometimes, the intending migrants have a fairly long time to plan their journey. In some cases, such as forced displacement, the emigrants are constrained by the urgency and criticality of the move, and the pre-departure phase is significantly shortened. In all, this phase can take as long as years or months and can be very expensive, especially for those migrating through irregular media (IOM's Essentials of Migration Management, 2025).

The next migration phase is the transit. It involves the actual movement or departure towards the intended destination. This phase can be equally challenging, especially for those transiting by unofficial routes. Even for regular-channel migrants, there are instances where direct flights from one country to another are unavailable or prohibitively expensive. Therefore, migrants often have to settle for indirect flights with multiple stops and layovers, which can be as brief as minutes or as lengthy as several hours, resulting in exhaustion (IOM's Essentials of Migration Management, 2025).

The third stage in the migration process is the post-migration stage, which includes the arrival and stay at the new location. The immigration controls set by each country, as well as travel routes—whether by air, sea, or land—can make the arrival process either seamless or additionally stressful. However, once entry is secured into the new environment, migrants begin their adaptation process on multiple levels, including language, food, social

networks, roles, and culture, among other necessary changes, for absorption into the host society (Bhugra& Becker, 2005, 19).

While some migrants do not return to their country of origin, others do, in which case the return phase of the migration process begins. At other times, migrants oscillate between their home country and their current abode. This is the case for circular migration. The return decision is complicated and can be voluntary or involuntary. For instance, where voluntary, a student or employment migrant may choose to return home willingly after completing their studies or at the end of a temporary work assignment. In the other case of involuntary return, due to visa expiration or deportation, someone else may be forced to return home (IOM's Essentials of Migration Management, 2025).

The Relationship Between Migration and Health Outcomes

The World Health Organisation (WHO) defines health holistically as “a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity” (World Health Organisation, 2024a). Of course, people's health and well-being are not just affected by a factor, and while some of these elements may be under an individual's control, others are not—like where a person lives or works (Derbyshire County Council, 2024). Among many others, the wider or global determinants of people's health and well-being are social and economic milieu, physical habitat, and an individual's idiosyncratic behaviours and characteristics (World Health Organisation, 2024b). Therefore, as people change their physical environments, the switch in surroundings may trigger health challenges, especially mental health.

Part of the changes that characterised the 20th century concerned the inter-relations between countries and the volume and direction of international migration, including the “patterns of health associated with those new spatial and social interactions.” Globalisation made the world smaller, as it were, with health concerns in a country or

region escalating in effect to other parts of the world (Carballo & Mboup, 2005, 1). Whether one considers the approximate 200 million economic migrants (precise figures remain elusive) globally every year, where 30 million are *unofficial*, or the other forms of unforced and forced migrations, Carballo and Mboup note that the volume, speed, and multidirectional nature of current migration trends come with various health implications, including the spread of health conditions unique to a geographical area and the trauma of dealing with unwelcoming hosts (Carballo & Mboup, 2005, 2).

The relationship between migration and health is complicated. Rightly so, it is affected by various factors like migrants' cultural, social, and economic backgrounds, health history, quality of life and the healthcare they had before relocating, the circumstances necessitating the migration journey, and the health and social dynamics of re-settling (Wolffers, Verghis, & Marin, 2003). With migration being multifaceted, again, ranging from pre-departure to transit, post-migration, and return, the implication is that migrants can have their health either negatively affected or boosted physically, mentally, or socially at any point on their journey (Migration Data Portal, 2024). In other words, migration and the conditions pertinent to the migration process can both heighten the risk of migrants to poorer health outcomes or enhance their quality of life and access to healthcare. The following are two categories in which migration affects migrants' health. The first is a very brief description, since it is not the focus of this paper, but the second is expanded a bit more, according to the migration phases.

Migration and Physical Health

Two key factors that can significantly shape migrants' journeys and determine their health condition during migration are the “mode of the travel and legal status of the migrant” (Davies, Basten, & Frattini, 2006, 7). In other words, migrants get exposed to several experiences during the migration cycle that can put even their physical well-being at risk, in addition to their social and mental health. For instance, those

who migrate involuntarily, perhaps under life-threatening conditions of human rights violations and natural and man-made disasters, trafficked victims, and irregular migrants, often find themselves in vulnerable situations like involvement in demeaning and dangerous jobs without health insurance (Davies et al., 2006, 7). Moreover, as with any other person, migrants bring with them the health profile and conditions of the countries and social contexts from which they emigrate. What's more, with economic migrants' relocation often in the direction of a more commercially empowered country compared to theirs, “a proportion of them can be expected to carry health profiles associated with poverty” (Carballo & Mboup, 2005).

Migration and Psychosocial Health

Psychosocial health is the other aspect in which migration may affect migrants' health, and it is relevant to this discourse because it encompasses the mental health dimension, which this paper explores. As a construct, psychosocial health is a superset of many subsets. So, that migration impacts people's psychosocial health implies that it can affect their “emotional or psychological well-being, as well as social and collective well-being” (Eiroa-Orosa, 2020, 1). Assessing the impact of migration on migrants' mental health through the psychosocial approach is not out of place. Psychosocial health connects social, cultural, and mental health, implying that a person's mental well-being can be influenced by “acting on the social factors that surround them” (International Organisation for Migration, 2004).

Again, the different phases of migration increase migrants' susceptibility to mental health challenges. For instance, the International Organisation for Migration observes that pre-departure experiences such as forced migration occasioned by hunger, political crises or violence, and human rights violations, among other factors, can condition how migrants go through exilic experiences and make them vulnerable. Moreover, relocation usually also means that

migrants are rooted out of their culture, disconnected from families and friends, and suffer job loss, among other losses, compounding their psychosocial health strain. Settling in a different locality also often presents more risk to migrants' psychosocial health, with experiences of uncertainty, racism, language and other cultural barriers being not uncommon (International Organisation for Migration, 2004, 1-2).

For instance, in the UK, since the introduction of the Commonwealth Immigration Bill in 1962, life has not been the same for migrants in the country. Through the Commonwealth Immigration Act, the conferment of inferior status on *immigrants*, including Black migrants, introduced many limitations to their lives. In addition to curtailing the entry of Commonwealth citizens to only individuals with employment permits, migrants were limited in the kinds of jobs or housing available to them, as well as in educational privileges, among other restrictions, to date (Fryer, 2018, 387-388). All these impact migrants' mental health, especially for people who have never experienced second-class treatment in their countries of origin and were, in many cases, gainfully employed, but have had to relocate involuntarily.

It is sufficient to say that the migration process entails various forms of stress and requires adaptations at different stages of the journey. These conditions often create psychosocial vulnerabilities that come together to affect migrants' mental health and well-being. Below are the ways migrants' mental health could be affected during the different migration phases:

Pre-migration

In this initial phase of migration, mental health may not be significantly affected, as in subsequent stages, due to migrants' younger age compared to succeeding stages and the absence of physical relocation stress and adaptive challenges of post-migration

(Bhugra& Becker, 2005, 19). Nevertheless, the decision to relocate remains laden with concerns about those who would be left behind, a sense of loss on multiple levels, and uncertainty about what to expect (Carballo &Mboup, 2005, 4). For instance, with increasing restrictions on work permits and costly visa fees, many migrants may find it challenging to travel alongside their partners. This situation can create immediate anxiety and a profound sense of loss for the migrants, even as they plan their move. At times, migrants may be able to journey with their partners but must leave their children behind with relatives. Such family destabilisation carries profound implications for everyone involved. For the migrants, the prospect of being separated from loved ones can be psychologically distressing. Even for those who would be left behind, it is difficult, particularly when the migrant provides financial security for the family. In cases of involuntary migration, where individuals move because of dangers to their lives or human rights violations, hunger, natural disasters, or other pre-migratory traumatic experiences, emigrants may be even more vulnerable to mental health challenges, as this distress permeates their entire migration experience.

Transit

The hassles of physically transiting from one place to another can make this stage challenging. Beyond the physical exertion, though, this phase in the migration process can also be mentally exhausting. In addition to the heightened reality of the sense of multiple losses, it can be mentally draining for migrants who may have to travel by connecting flights across countries before reaching their destination, especially when they have to stay longer than expected in transit countries. The thought of being held back from achieving their goals can add to the already present sense of loss of family members, jobs, and other critical support systems. It may even be more serious for those who move through irregular routes. They often have to go through long and light-threatening journeys without access to

healthcare. For instance, they may be huddled and hidden in trucks, boats, and trains in unfitting conditions and have to travel lonely and dangerous routes in poor climatic conditions. Where migrants survive these precarious situations, they may end up with enduring physical and mental health conditions (Davies et al., 2006, 7-8).

Post-Migration

Once admitted into their destination country, migrants have to adapt to the norms of the new society in which they now find themselves. This is often not an easy process, as it involves trade-offs and new learnings. Learning another language, for instance, and adopting another way of life is never a walk in the park, especially with the emotional connections migrants already have with their home culture. So, it becomes psychologically unsettling not to have the liberty to fully lead their lives according to the social and cultural norms they were familiar with (Davies et al., 2006, 10). Homesickness and the sense of loss of families and friends, who are no longer there to provide social support, if left unaddressed, may degenerate into mental health illnesses for migrants. With the social backing being both at individual and societal levels, social isolation and exclusion in the new community, compounded possibly by discrimination and racism, can lead to migrants' poor mental health conditions. Resorting to drugs and alcohol, depression, pregnancy complications, and chronic diseases may become more likely (Wilkinson & Marmot, 2003, 22).

Return

For migrants who are forced to return home, perhaps due to the expiration of their permission to remain in their host country, where goals and aspirations are yet to find realisation, shame, stigmatisation, and disappointments may cause them to slip into depression or other mental health conditions. Moreover, returning migrants who attempt dangerous irregular routes and are unsuccessful on their journeys may have already developed physical and mental health problems, which may worsen due to limitations to

healthcare at home (Davies et al., 2006, 8).

Recommendations for Christians Who May Need to Migrate

This section of the paper draws from a short essay published by the author elsewhere (Ayokunle, 2023, 1-2). It adapts the ideas from the brief write-up to provide useful tips for those seeking to migrate today, especially internationally. In the original essay, the author engaged a Yorùba adage to highlight two categories of actions for African Christians to migrate successfully when they decide to do so. The maxim, *À ñ pégbónni, a kùpéégò*, is roughly translated as, “When we come together to reflect, it should inspire wisdom rather than foolishness.” It is more or less a cultural paraphrase of Proverbs 11:14, which reads, “Where there is no guidance, a nation falls, but in an abundance of counsellors there is safety” (NRSV). In this work, *à ñ pégbónni, a kùpéégò* highlights the criticality of consultation, evaluation, and counsel throughout the migration process. Below are the two kinds of consultations this essay proposes for migrants, especially Christians, to have an enriching relocation experience.

Consultation with the Divine

It was the renowned African Theologian John Mbiti, who observed in his reprinted 1969 publication entitled *African Religions and Philosophy*, that “Africans are notoriously religious ... Religion permeates into all the departments of life so fully that it is not easy or possible always to isolate it” (Mbiti, 1970, 1). Of course, Mbiti's observation remains true today. For instance, in Christianity, it is perhaps no longer news that over the last century, there has been a shift in the heartland of Christianity from the global North to the South (Africa, Asia, Latin America, Oceania), demographically and in many other areas, with Africa being at the centre of this unexpected change.

Africans are, indeed, a spiritually-conscious people. To them, the spiritual and physical worlds form a continuum that is not necessarily separable. So, there is the understanding that the immaterial world

constantly interacts with the material. The Bible also affirms this worldview and further suggests that the tangible world is a product of the intangible, for "... what is seen was made from things that are not visible" (Hebrews 11:3 (NRSV)). By implication, the physical is at the mercy of the spiritual. Elsewhere, in Daniel 4:17 (NASB), the Bible also records that "... the Most High [the Divine] is ruler over the realm of mankind."

Consequently, it is wisdom for humans, including migrants, to consult God at every phase of their migration process. At the pre-migration stage, the decision to move is a major one that can have a significant impact on migrants, their families, and friends. As such, it is wise to consult God, the all-knowing (1 John 3:20) and all-wise One (1 Tim. 1:17). He specialises in "declaring the outcome [of any move] from the beginning and from ancient times things not yet done, saying, "My purpose shall stand, and I will fulfill my intention"" (Isaiah 46:10 (NRSV)). To acknowledge the divine before taking any step (Proverbs 3:5-6) is to open up to the advantage of the all-knowing and all-wise God, who can keep migrants from embarking on a disastrous journey or furnish them with the assurance they need for a prosperous move. Having this conviction about the intended journey can be the antidote to the anxieties that may already be growing regarding the relocation or those to be left behind. Hence, migrants can be in a better psychological state as they prepare for their transition, when they consult with God, the Divine.

Even during transit, many unforeseen events can occur, such as flight delays, cancelled or missed flights, unplanned expenses, misplaced or stolen luggage, motion sickness, or other illnesses and incidents that can destabilise migrants. However, having committed their ways to God, migrants can have the mental staying power to pull through, knowing that they have secured God's approval and backing for their travel (Psalms 37:5). So, as events unfold, planned or unplanned, migrants expect that God can and will make all things work together

for their good (Romans 8:28). It does not matter whether the unexpected situation is sweet or otherwise, this does not raise doubts, anxieties, or regrets in their minds about their move. They are convinced that the Divine, who reigns in the affairs of men, is with them. So, Isaiah 43: 1-2 easily puts them at rest that:

But now thus says the Lord ... Do not fear, for I have redeemed you; I have called you by name; you are mine. When you pass through the waters, I will be with you, and through the rivers, they shall not overwhelm you; when you walk through fire you shall not be burned, and the flame shall not consume you.

Of course, the same mindset that applies during transit is required post-migration. Acknowledging God in all decisions must continue to secure good success in the new land, especially as the need to deal with multifaceted adaptive challenges surfaces. Faith and, indeed, God may be the only succour for migrants, as they arrive in a *strange* community, where they look different, are in the minority, have to learn new ways of life, lack social support, and nurse a sense of loss on various levels, including identity, culture, and other forms of trade-offs. Without faith that acts as a string of spiritual support, migrants may find the necessary adjustments and adaptations to their host environment overwhelming, which may eventually take a toll on their physical and mental health.

Interaction with Relevant Resources

Throughout the migration process, seeking counsel from God is crucial, but so is consulting with resourceful persons, materials, and other genuine information-sourcing platforms. As Proverbs 19:20 (NRSV) notes, “Listen to advice and accept discipline, and at the end you will be counted among the wise,” it is important for migrants, in all phases of their journeys, to verify the ideas, assumptions, and other information they hold for authenticity, accuracy, and correctness. Indeed, no one knows it all, as 1 Corinthians 8:2 (NASB) says, “If anyone supposes that he knows anything, he has not yet

known as he ought to know.” A Yoruba adage also asserts, *ìpàkóónípàkólàárí, enieléniniíbánirítí'ni*, which roughly translates, “You only see the back of another's head, someone else sees yours.”

In essence, everyone or every perspective has a blind spot or weakness. Surely, migrants' emotional attachments may cloud their judgments. Hence, they will do well to learn to seek objective perspectives about their plans and conceived notions. They must seek out and be entirely open to those who care for them enough to evaluate their ambitions and assumptions sincerely. Of course, the truth may be hard to bear, especially when it tends to contradict ideas migrants may already hold dear and are emotionally sympathetic towards. Yet, opening up to those who will only affirm them, even when their expectations are misguided or inaccurate, is only a recipe for frustration.

The story of a young lady who was planning to relocate to the United Kingdom a few years ago easily comes to mind. Adeola (a pseudonym) was a friend of the author's wife, Sade (a pseudonym), and had reached out for guidance before her migration—an applaudable move. Adeola was gainfully employed back in her country but was determined to migrate at all costs, even if it meant relocating as a student, despite the attendant restrictions. However, she was not too pleased with Sade's candidness about the realities of life in the UK, including the constraints associated with being a student in the country, relocation costs, school and maintenance fees, and other implications of trading off desirable employment for such a move. Adeola never contacted Sade again until several months after her migration. She confessed in her first phone call, now in the UK, that she had stayed out of touch with Sade because of their initial conversation. To her, while back home, she felt Sade was only attempting to discourage her from migrating to enjoy the *heaven-on-earth* life she had imagined about the UK. Today, she wonders if she has made the right move, as she cannot live the kind of luxurious life she had fantasised about.

Seeking out relevant associations, materials, and other resources after arriving at the destination country is also important, as with the pre-departure stage, for migrants' quick adaptation and settlement. Again, according to Proverbs 11:14, “Where there is no guidance, a nation falls, but in an abundance of counsellors there is safety” (NRSV). Nonetheless, migrants must ensure that these counsellors are fitting, as the wrong people can equally limit their (migrants) mindsets, opportunities, and gains in the new land. A Yorùba adage comes to mind here, which says, *Eni tí ó dásòfúnni, tiorùnrèlààwò*, and roughly translates, “One first observes the attire of the person who has promised to make one a cloth.” The implication is that, by carefully considering the lives of potential counsellors, migrants may be able to tell if their advice is worth embracing or not. Of course, the higher and more accurate litmus test would come from seeking clarity from the Divine. Hence, the necessity of a sustained consultation with Him, God. With the right counsel, migrants may be furnished with the needed sets of information to help tackle discrimination, marginalisation, and other negative experiences they could encounter in their new locale. Thus, they can respond better and thrive, rather than crash under the weight of the psychological traumas that result from ugly experiences.

Ensuring to obtain guidance from God, men, and other relevant resources, even when deciding to remain or return home, is also very crucial. Just as with the pre-departure phase, this step may just be the difference between embarking on a regretful journey of shame and stigmatisation or success. A priest once shared his story about how he decided to return home after completing his studies in the UK, even when he could have extended his permission to stay in the country. He decided to return home, though, after having a dream. In the

vision, he saw how he was arrested for an offence he had not committed and sent to jail while working post-study. As he noted, the dream was enough direction from God to him, as it was not the first time he would receive God's guidance through dreams. A few years after returning home, he was elected to a prominent position of service that he never anticipated. He, then, understood more clearly why he needed to be back home. The return was a fruitful journey for him, but perhaps not for all migrants. I wonder how many migrants have made a move in the wrong direction that has brought them regrets and depression, or other physical and mental health conditions that could have been avoided through adequate consultations.

Conclusion

Migration remains intrinsic to human nature. People will always have reasons to move, whether voluntarily or involuntarily. Even the biblical patriarchs were characterised by people movement. Moreover, in this era of unprecedented and increasing globalisation driven by various forces, migration is not slowing down soon and may never. Many push and pull factors will continue to shape the direction and magnitude of international migration. However, the migration process is pregnant with diverse challenges that can impact migrants' health physically and mentally, including the channel through which the transition happens. So, migrants will do well to be well-prepared for their transit before embarking on it. To this end, this paper has proposed some recommendations from an African Christian perspective for a successful migration experience. As the essay maintains, migrants will undoubtedly save themselves a lot of frustration and pain when they learn to consult with God, people, and other critical and relevant resources, as they decide to move, travel, and adjust to life in a new place.

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