Life Satisfaction and Healthy Lifestyle Behavior Changes of the Unıversity Students who Migrated From Syria to Turkey Due to the War

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Abstract

Introduction: War and migration are an international public health problem that has an irreparable effect upon issues concerning public health either directly or indirectly. Thus, wars and migrations are involved in the field of public health and in the area of interest of public health professionals. There is a need for planning healthcare services and determining the needs and conditions of these services for this group.
Methods: This study was conducted for the purpose of examining the life satisfaction of university students, who migrated from Syria to Turkey due to the war, and the changes in their healthy life style behaviors.
Results: Serious adverse changes were determined in the life satisfaction and healthy life style behaviors of university students who migrated from Syria to Turkey due to the war.
Conclusion: It is very important for nurses to comprehend the importance of health promotion, perform motivating behavior for development of positive health behavior by individuals in the society, and develop educational programs in accordance with their needs by determining their current lifestyle behaviors. There is not enough value for those topics in the general literature. These findings suggest that more care must be given for immigrating individual.

Keywords: War, migration, life satisfaction, healthy lifestyle behaviors, university student, nursing care.

Background

War and migration are an international public health problem that has an irreparable effect upon issues concerning public health either directly or indirectly, changes life style behaviors by obstructing the normal life of society, and decreases/destroys life satisfaction by removing support systems that would enable coping (Bebis and Ozdemir, 2013). Migration and health are increasingly recognized as a global public health priority (IOMa, 2017). Incorporating mixed flows of economic, forced, and irregular migration, migration has increased in extent and complexity.

Globally, it is estimated that there are 244 million international migrants and significantly more internal migrants people moving within their country of birth (IOMb, 2017). Turkey has faced the most important migration movement of its history due to the Syrian war. Since March 2011, when the war began, it has caused dramatic damages on people and the Syrians, who did not find themselves safe in their country, began to migrate to countries that are safe according to them (Seydi, 2014).

The known total number of people who have migrated to Turkey since 1 March 2018 is dedicated as 3.540.648 (Refugees Community Centre, 2018). The fact that number of refugees and duration of asylum is higher than the expected, and the great confusion has forced a higher importance to education (Seydi, 2014; Seydi, 2013).

Despite limited opportunities of resources and places; positive responses have been tried to

give to migrant families who seek a solution to educational problems of their children (Seydi, 2014).

People who come to Turkey for reasons such as safety of life and education are a group that should be specifically examined in terms of their health related services due to their various cultural and social characteristics (Elma and Sahin, 2015). Because migrants who struggle with impossibilities face important risks due to their conditions before migration, conditions encountered during migration and unhealthy life conditions in the environments they come with migration (Cicek Korkmaz, 2014). In that case, in addition to the effect of migration upon social, economic and cultural areas; the stress caused by the migration and adaptation problem negatively affects the mental health of individuals (Elma and Sahin, 2015; Oz et al., 2015).

These individuals may experience negative feelings like sadness, failure and misery throughout their lives. In order to cope with such feelings, they need to calm down, relax and above all, overcome these negative feelings without any damage (Deniz et al., 2012). Individuals in society should acquire positive health behaviors and form their own life styles to protect and promote their health (Tambag, 2011; Aksoy and Ucar, 2014).This is because life style of individuals affects both their life style and life duration and satisfaction (İlhan et al., 2010). Thus, wars and migrations are involved in the field of public health and in the area of interest of public health professionals.

This was conducted as cross-sectional study to examine the life satisfaction and the changes in their healthy life style behaviors of university students, who migrated from Syria to Turkey due to the war.

Methodology

Population and Sample of the Study

The population of the study consisted of 524 Syrian students who had exact registration at Gaziantep University in the Fall Term of the Academic Year of 2014-2015 and have still received education. Sample size was determined as 217 by using the power analysis

and 228 students who agreed to participate in the study were included in the sample. In this study conducted by using stratified sampling method, each faculty was accepted as a strata and the students were selected by using simple random sampling method after determining their numbers according to the weight of strata.

Total number of students at faculties and the number of students that was obtained by using simple random sampling method.

Data Collection

The data were collected by using a questionnaire prepared by the researchers to determine the socio-demographic characteristics of students and Life Satisfaction Scale (LSS) and Healthy Life Style Behaviors Scale (HLBS) in 2015.

As scales were aimed at determining their changes before and after migration, the students were asked to answer each scale item by considering their past and present conditions.

Ethical Dimension of the Study

Within the scope of this study, a written institutional permission was obtained from the Rectorship of University. An ethics committee approval was received from University Clinical Trials Ethics Committee (decision numbered dated:11.08.2014).

Following ethical principles were fulfilled as follows; "verbal consent" and "informed consent" by explaining the objective of the study to the participants.

Analyses

The data obtained from this study were coded by the researcher and then transferred into computer, and the necessary analyses were carried out by using the SPSS 18 program. The data were assessed by using percentage, Independent Samples T Test, OneWay ANOVA Test and Kruskal Wallis-H Test.

Limitations of the Study

Students who came to Turkey from Syria on their own volition or with a special training program were excluded from the study due to the fact that they could receive misleading

answers during the filling of data collection tools.

Study Questions

1. Does migration due to war affect the life satisfaction of university students?

2. Does migration due to war affect the healthy life style behaviors of university students?

Findings

Socio-Demographic Characteristics

The students aged 18 and older than 23 had high scores only from the subscale nutrition among the subscales of HLBS were determined to be higher and there was a significant correlation between them ($p<0.05$). It was found that students who have 800 TL and above monthly income have higher scores of spiritual growth, physical activity, nutrition, interpersonal relations and higher HLBS total score and there is a significant difference between them.The health responsibility subscale score and SWLS total score of the students, whose mothers were illiterate, health responsibility subscale score of those, whose fathers were illiterate, and nutrition score of those, who were not substance abuser, were higher, and a significant difference was determined between these subscales ($p<0.05$). Physical activity, interpersonal relations, and stress management scores and HLBS total scores of the students with normal Body Mass Index (BMI) were found to be higher and a significant difference was determined between these subscales ($p<0.05$) (Table 1).

Educational Characteristics

The scores obtained by the students, who did not lose a year in the university education due to the war, from the subscales physical activity and nutrition of HLBS and their HLBS total scores were found to be higher and a significant difference was determined between them ($p<0.05$). (Table 2)

HLSB and SWLS Changes Before and After Migration

When the periods before and after migration were compared with regard to healthy lifestyle behaviors and life saisfaction, results show that the students are adversely affected by the migration ($p<0.05$) (Table 3).

Discussion

Socio-Demographic Characteristics: It has been found that age has an effect on nutrition and feeding habits are better, especially in the 18-23 age range. There was no significant difference between other factors of scales ($p>0.05$) (Table 1). Al-Kandari and Vidal (2007) determined that stress management scores significantly increased as age increases. Cihangiroglu and Deveci (2011) were determined that health responsibility and interpersonal relations scores increased as age increases. In the study of Aksoy and Ucar (2014) the scale mean scores of the students were examined in terms of socio-demographic characteristics, the highest HLBS mean score was found in the age group of 24 years and above and mean scores also increased with increasing age but there was no difference between them. Similarly, in this study mean score of nutrition was higher in the age groups of 18 years and 23 years and above. The possibility of substance abuse is thought to increase due to trauma and intense stress caused by war and migration. In this case, public health nurses should be performing preventive actions. Physical activity, interpersonal relations, stress management and total score were found to be high among students with normal BMI, compared to those were slim and overweight and there was a significant difference between them ($p<0.05$) (Table 1). Cihangiroglu and Deveci (2011) determined that 77.6% of students studying at health field were normal weight and found that their HLBS total score was 121.7±18.8, physical activity score was 8.8±3.3, interpersonal relations score was 20.7±3.7 and stress management score was 17.7±3.9. In the study conducted by Soyuer et al. (2010), it was found that physical activity score was higher in the university students with normal weight and physical activity score decreased as BMI value increases. If the field of public health nursing includes the attempts of reaching the ideal weight of the individuals, especially under the effect of war and migration, in terms of protective and health promotion aspects, individuals can have high life satisfaction and healthy life style behaviors.Students who monthly income of more than 800 TL are generally found to be more positive behaviors. Even though no significant difference was found in the study, the students' monthly incomes were determined to be low in general (Table 1).

Table 1: Distribution of Socio-Demographic Characteristics of the Students and their Healthy Life Style Behaviors and Life Satisfaction Characteristics after Migration (n=228)

SOCIO-DEMOGRAPHIC CHARACTERISTICS		(n)	HLBS Subscale Scores (M±SD)						HLBS Total Score M±SD	LS Total Score M±SD
			Spiritual growth	Health responsibility	Physical activity	Nutrition	Interpersonal relations	Stress management		
Age	18	(34)	21.5±4.3	17.7±4.1	16.5±3.6	21.2±3.5	21.6±4.2	19.0±3.7	117.7±18.3	12.6±5.3
	19	(39)	21.5±4.4	17.3±4.9	16.8±3.9	19.5±3.1	22.0±4.8	18.7±3.2	116.1±18.8	12.3±6.1
	20	(51)	20.2±3.3	16.8±4.2	17.2±4.2	19.7±3.6	20.5±3.6	18.1±3.5	112.7±18.2	10.9±5.0
	21 and 22	(59)	21.3±5.0	17.5±4.0	16.3±4.6	19.2±3.0	21.2±4.3	17.9±3.6	113.8±19.3	12.0±4.9
	23 or up	(45)	22.7±4.5	19.0±5.1	16.6±4.5	21.1±3.9	21.9±3.7	19.2±3.7	120.7±20.3	12.7±6.6
Statistical Analysis			F=1.86	F=1.58	F=0.32	**F=3.11***	F=0.91	F=1.10	F=1.30	F=0.79
Gender	Woman	(117)	21.3±4.6	17.5±4.5	16.3±3.6	19.8±3.2	21.2±4.2	18.4±3.6	114.8±17.9	12.3±5.6
	Man	(111)	21.5±4.4	17.8±4.5	17.0±4.7	20.2±3.8	21.5±4.0	18.7±3.5	117.0±20.3	11.7±5.5
Statistical Analysis			t= -0.30	t= -0.58	t= -1.24	t= -0.88	t= -0.45	t= -0.61	t= -0.86	t=0.74
Substance Abuse	Not user	(177)	21.7±4.5	17.7±4.6	16.9±4.1	20.3±3.5	21.4±4.0	18.7±3.6	116.8±18.9	12.4±5.5
	User	(51)	20.6±4.4	17.5±4.7	16.1±4.5	19.1±3.4	21.2±4.5	18.0±3.3	112.6±19.5	10.7±5.8
Statistical Analysis			t=1.48	t=0.32	t=1.16	**t=2.07***	t=0.40	t=1.19	t=1.38	t=1.93
Student's Work Status	Yes	(44)	22.0±4.4	18.1±4.8	17.1±5.3	20.5±4.1	21.7±4.0	18.2±4.3	117.8±21.1	13.6±6.9
	No	(184)	21.3±4.5	17.5±4.4	16.6±3.9	19.9±3.3	21.3±4.1	18.6±3.4	115.4±18.6	11.7±5.2

Statistical Analysis			t=1.02	t=0.61	t=0.59	t=0.97	t=0.51	t= -0.53	t=0.69	t=1.69
Student's Monthly Income	not enough	(96)	20.7±4.1	17.2±4.4	16.7±4.0	19.5±3.1	20.6±3.7	18.2±3.0	113.2±17.4	11.6±5.8
	Middle	(78)	21.3±4.6	17.7±4.8	16.0±3.9	19.6±3.6	21.3±4.0	18.7±4.1	114.8±20.6	11.6±5.0
	enough	(36)	22.9±5.1	18.4±4.3	15.5±5.4	21.4±3.9	23.1±5.1	18.8±3.5	120.3±20.5	12.6±5.6
	Far enough	(18)	23.7±4.3	18.2±3.3	18.7±3.3	21.8±3.5	23.3±3.6	19.0±4.1	123.0±14.2	14.8±5.9
Statistical Analysis			**F=2.65***	F=0.64	**F=3.21***	**F=4.73***	**F=3.40***	F=0.51	**F=2.82***	F=2.00
Body Mass Index (BMI)	Weak	(17)	19.7±4.9	15.7±4.0	13.4±3.6	18.6±3.2	18.2±2.6	16.4±4.8	102.2±18.6	11.1±4.1
	Normal	(148)	21.6±4.4	18.0±4.4	17.2±4.3	20.2±3.3	21.7±4.2	18.7±3.5	117.8±18.4	11.8±5.0
	Obese	(63)	21.4±4.5	17.4±4.6	16.2±3.7	19.9±3.9	21.4±3.8	18.5±3.2	115.0±19.5	12.7±7.0
Statistical Analysis			F=1.37	F=2.22	**F=7.03***	F=1.69	**F=5.75***	**F=3.38***	**F=5.37***	F=0.78
Mother's income status	No income	(192)	21.4±4.3	17.7±4.3	16.7±4.24	20.1±3.4	21.5±4.2	18.6±3.5	116.3±18.8	11.9±5.6
	Has income	(36)	22.3±4.7	17.5±3.9	16.3±3.8	19.6±3.1	20.6±3.5	18.2±3.5	114.6±16.7	12.1±4.9
Statistical Analysis			t=-0.90	t=0.20	t=0.52	t=0.75	t=0.88	t=0.55	t=0.39	t=-0.15
Father's income status	No income	(177)	21.2±4.2	17.4±4.5	16.6±4.1	19.8±3.4	21.1±3.8	18.5±3.6	114.9±18.4	11.8±5.4
	Has income	(51)	22.1±5.2	18.5±4.5	17.5±4.5	20.7±3.8	22.2±5.0	18.5±3.5	119.3±21.1	12.9±6.3
Statistical Analysis			t=-1.25	t=-1.50	t=-0.63	t=-1.48	t=-1.71	t=0.52	t=-1.43	t=-1.24
Expense Ratio of Family Income	Less	(74) (124)	22.2±4.7	18.1±4.7	17.0±4.8	20.1±4.0	21.6±4.4	18.5±3.7	117.9±21.3	12.2±5.8
	Equal	(30)	20.9±4.3	17.3±4.4	16.5±3.8	19.8±3.3	21.3±3.9	18.3±3.5	114.4±17.8	12.3±5.6
	More		21.5±4.6	17.8±4.2	16.7±4.5	20.5±3.1	21.3±4.0	19.3±3.6	117.2±18.7	10.2±4.5

Statistical Analysis			F=1.99	F=0.78	F=0.38	F=0.45	F=0.22	F=0.77	F=0.87	F=1.85
Mother's Education Level	Uneducated	(30)	22.4±4.5	18.6±4.1	16.2±4.7	20.9±3.8	21.4±4.5	18.0±4.1	117.7±20.1	14.5±7.6
	Primary	(133)	21.4±4.2	18.1±4.5	17.0±4.0	20.1±3.4	21.4±4.1	18.9±3.6	117.1±19.0	11.5±4.9
	University	(65)	21.0±5.0	16.4±4.3	16.3±4.3	19.5±3.5	21.3±4.0	17.9±3.2	112.7±18.8	11.9±5.6
Statistical Analysis			F=0.95	**F=3.83***	F=0.81	F=1.64	F=0.00	F=2.40	F=1.31	**F=3.39***
Father's Education Level	Uneducated	(14)	23.7±6.1	20.8±5.2	17.0±4.2	20.5±2.8	22.6±5.4	19.7±4.1	124.5±22.1	13.2±7.1
	Primary	(96)	21.2±4.3	17.3±4.2	16.6±4.0	20.2±3.3	21.5±4.1	18.1±3.4	115.2±17.8	12.6±5.9
	University	(118)	21.3±4.3	17.5±4.5	16.7±4.4	19.8±3.7	21.1±3.9	18.7±3.6	115.4±19.6	11.4±5.1
Statistical Analysis			F=1.97	**F=3.80***	F=0.09	F=0.59	F=0.89	F=1.37	F=1.53	F=1.57
Pre-Migration Lived Location	Province	(165)	21.4±4.5	17.6±4.6	16.7±4.5	20.1±3.7	21.3±4.3	18.3±3.4	115.6±19.8	11.9±5.6
	District	(51)	21.9±4.6	18.0±4.5	16.8±3.4	20.0±3.1	21.9±3.6	19.4±4.0	118.1±18.2	12.3±5.7
	Village	(12)	20.2±2.5	16.5±2.8	15.5±2.6	19.4±2.1	20.2±2.5	17.7±3.8	109.7±10.2	11.6±4.7
Statistical Analysis			F=0.74	F=0.54	F=0.45	F=0.22	F=0.97	F=2.02	F=0.99	F=0.13
Now living Place	State dorm	(53)	22.3±5.0	18.4±4.7	17.5±4.2	20.1±3.8	22.3±4.5	18.9±3.2	119.8±20.9	12.1±6.2
	With family	(136)	21.1±4.4	17.5±4.8	16.2±4.2	20.0±3.4	20.9±4.0	18.2±3.8	114.1±19.2	12.1±5.6
	Studenthouse	(39)	21.3±4.0	17.2±2.9	17.1±4.3	20.0±3.3	21.8±3.6	19.0±3.3	116.7±15.5	11.7±4.7
Statistical Analysis			F=1.42	F=1.06	F=1.92	F=0.48	F=2.43	F=1.18	F=1.76	F=0.10

(*) $p < .05$

Table 2: Distribution of Students Educational Features and Healty Lifestyle Behaviours and Life Satisfaction After Migration

(*) p<.05 EDUCATION FEATURES		(n)	HLBS Subscale Scores (M±SD)						HLBS Total Score (M±SD)	LS Total Score (M±SD)
			Spiritual growth	Health responsibility	Physical activity	Nutrition	İnterpersonal relations	Stress management		
Faculty discipline	Science	(167)	21.4±4.6	17.6±4.5	16.3±4.3	19.9±3.5	21.3±4.1	18.6±3.7	115.2±19.5	11.9±5.8
	Health	(32)	21.1±4.4	17.6±3.6	17.6±3.2	20.4±2.6	22.2±4.2	18.2±2.9	117.4±15.3	11.7±4.3
	Social	(24)	22.2±3.5	17.8±5.5	17.6±4.8	20.0±4.3	20.5±4.1	18.5±3.9	116.8±20.9	13.2±6.1
	Educational	(5)	21.0±4.3	19.4±3.4	18.6±3.7	22.2±5.7	22.4±3.3	19.0±2.9	122.6±21.5	12.2±4.5
Statistical Analysis			F=0.27	F=0.26	F=1.65	F=0.84	F=0.82	F=0.12	F=0.34	F=0.38
The Department Eligibility to Interest	Inappropriate	(27)	21.4±4.5	18.4±3.8	16.5±4.3	20.4±3.6	20.7±4.1	19.1±3.7	116.7±19.0	12.8±7.6
	undecided	(56)	20.7±4.1	16.7±4.0	16.0±4.1	19.6±2.9	20.8±3.4	18.1±3.7	112.1±17.8	12.2±4.9
	appropriate	(145)	21.7±4.6	17.9±4.7	17.0±4.2	20.1±3.7	21.7±4.3	18.6±3.5	117.2±19.5	11.8±5.4
Statistical Analysis			F=1.09	F=1.66	F=1.26	F=0.61	F=1.44	F=0.69	F=1.46	F=0.43
To choose willingly Department	Yes	(153)	21.2±4.2	17.5±4.4	16.9±4.2	20.2±3.6	21.4±4.0	18.2±3.3	115.7±18.6	11.5±5.1
	No	(41)	22.2±5.7	18.0±4.6	16.1±4.4	19.5±3.4	21.3±4.1	19.3±4.2	116.6±21.0	12.9±7.0
	Undecided	(34)	21.6±4.0	17.8±4.8	16.5±3.9	19.8±3.1	21.2±4.6	18.8±4.0	115.9±19.2	13.5±5.4
Statistical Analysis			F=0.77	F=0.22	F=0.52	F=0.67	F=0.05	F=1.46	F=0.04	F=2.42
Due War University Total Lost Years	0	(63)	22.1±4.5	18.8±4.9	17.4±4.8	20.8±3.6	22.2±4.4	19.2±3.4	120.7±19.2	12.25±6.0
	1	(72)	21.4±4.3	17.7±4.6	17.2±3.8	20.2±3.9	21.6±3.9	18.8±3.9	117.1±20.3	12.56±5.5
	2	(58)	20.7±4.0	17.0±4.2	16.3±4.0	19.8±2.8	20.9±4.0	17.8±3.2	112.7±16.9	11.12±5.3
	3 or up	(35)	21.5±5.6	16.5±3.8	15.0±3.8	18.6±3.3	20.2±3.9	17.9±3.7	110.0±18.0	12.22±5.5
Statistical Analysis			F=0.89	F=2.55	**F=2.92***	**F=2.92***	F=2.13	F=2.13	**F=3.15***	F=0.76

Table 3: Distribution of Students Characteristics Related to Healthy Life Style Behaviors and Life Satisfaction Before and After Migration

Characteristics Related to Healthy Life Style Behaviors (HLBS) and Life Satisfaction (LS)		Pre-migration M±SD	Post migration M±SD	t	p
HLBS Subscale	Health responsibility	21.01±4.29	17.69±4.52	10.72	<.001
	Physical Activity	19.08±3.90	16.72±4.25	8.04	<.001
	Nutrition	22.54±3.59	20.05±3.54	8.80	<.001
	Spiritual growth	28.35±4.54	21.47±4.52	15.59	<.001
	İnterpersonal relations	25.30±3.92	21.42±4.15	11.99	<.001
	Stress Management	22.10±3.3	18.57±16.45	12.22	<.001
	HLBS Total Score	135.32±16.45	115.92±19.13	12.49	<.001
	Life Satisfaction Total Score	29.82±5.49	12.06±5.62	31.21	<.001

Discussion Continuus ………

However, in the studies of Zaybak and Fadıloglu (2004), and Ozcakar et al., (2015) HLBS mean score of the students having a good economic status was found to be significantly higher than those with lower income. In the study of Ulla and Pérez, economic status affected interpersonal relations. In another study conducted by Ozyazıcıoglu et al., (2011) with students, there was no significant difference between HLBS total mean scores; whereas, a significant difference was found between the subscale nutrition and income level, and nutrition scores were observed to decrease in parallel of income levels. It was stated that the effect of income on well-being was strong as long as it helps meeting the basic needs, and its effect on life satisfaction decreased in case of wealth (Unalan et al., 2007). In a study conducted by Gundogar et al., (2007) with students, it was stated that as economic condition of students increased, their life satisfaction increased and their hopelessness, depression and trait anxiety scores decreased. It is known that working has a positive effect on and increases life satisfaction. Also, working contributes to formation of healthy life style behaviors. It can be asserted that high socio-economic level affects healthy life style behaviors positively by causing improvement in living conditions (Aksoy and Ucar, 2014). It is stated that, international studies focus on economic inequalities, citizenship inequalities because of effects on health status and immigration (Castaneda et al., 2015). New environment, increasing needs, and decrease of income level were thought to have adverse effects on health, life style behaviors and life satisfaction.It was found that the education level of the parents affected the health responsibility of the students. Researchs found no difference in life satisfaction of students according to educational levels of mothers and fathers. But it is the known fact that most of studies emphasis on educational status influence on immigrants and affects their health status (Wickramage et al., 2018). In the present study, both HLBS subscale scores and general mean scores of the scales were higher in those whose parents were illiterate. Mean scores of those whose parents were literate were lower could be thought to be associated with the fact that parents', who had resided in city centers and have a high status or good job, adapted to a new environment after migration, did not speak the language of the new environment, became distant from working life or had to work in unsuitable status.

Educational Characteristics: No significance was found between the faculties that students were enrolled in regard to their fields, appropriateness of their departments to their areas of interest and state of being willingly preferring the department (*p*>.05) and a significant difference was determined only between the number of years they lost in the university education due to war (*p*<0.05) (Table 2). When the number of the lost years and scale scores were examined, it was observed that as the number of the lost years increased, the scores decreased in general and those who lost 3 and more years had the lowest score. Even though there have been no similar studies in the literature, it is a known fact that war and migration affect education deeply. It was reported that attaching high importance to education in Syria and the time passing without education due to the war affected the young people adversely (Turkish Medical Association, 2016; Seydi, 2014). The results of the present study verify this situation. It can be asserted that the hard conditions of the students cause them to discontinue their education and also deterioration of healthy life style behaviors and a decrease in life satisfaction.

HLSB and SWLS Before and After Migration

When the results related to student's healthy life style behaviors and life satisfaction before and after migration were evaluated, HLBS total score and subscale scores and SWLS scores were found to be highly significant and an obvious decrease was observed in mean scores in post-migration period (*p*<0.05) (Table 3). No study examining effects of war and migration on students was found in the literature. However, the data of the present study were evaluated with the studies evaluating healthy life style behaviors and life satisfaction.In the present study, mean scores before and after migration decreased from 21.0±4 to 2-17.6±4.5 for health responsibility, from 19.0±3.9 to 16.7±4.2 for physical activity, from 22.5±3.5 to 20.0±3.5 for nutrition, from 28.3±4.5 to 21.4±4.5 for spiritual growth, from 25.3±3.9 to 21.4±4.1 for interpersonal relations, from 22.10±3.3 to 18.5±16.4 for stress management, from 135.3±16.4 to 115.9±19.1 for

HLBS total mean score, and from 29.8±5.4 to 12.0±5.6 for mean score of SWLS.

The lowest SWLS mean score was determined to be 20.40 and the highest mean score was found as 23.83 in the studies conducted about students' life satisfaction (Gundogar et al., 2007; Orkun, 2012). Life satisfaction is also known to be directly associated with changes of conditions, and increase of uncertainties and future concerns (Orkun, 2012). All these situations explain the decrease in life satisfaction of the students after migration in the present study. Migrants experience insecurity and hopelessness towards life and future as a result of migration. All the things new life brings affect negatively the individuals in all terms and primarily damage their life satisfaction.

As a result of various studies conducted about HLSB of university students, the highest and the lowest scores for HLBS subscales were found as follows: 18.9-29.75 for health responsibility, 8.7-16.8 for physical activity, 14.9-21.4 for nutrition, 22.2-38.2 for spiritual growth, 20.22-27.12 for interpersonal relations, and 17.5-19.8 for stress management. HLBS total mean score varied between 117.2±18.0 and 136.1±19.1 (Tambag, 2011; İlhan et al., 2010; Al Kandari and Vidal, 2007). Displaying HLSB can be achieved by choosing and applying the behavior to improve their health and having control on all the behaviors that can affect their health. However, the destructions that war causes damage all the support systems of the individuals and prevent them to have a voice in their own health. In this case, preserving and improving their well-being levels become impossible and none of the conditions that HLSB require is provided. The decrease in HLBS score as a result of our study explains all of these situations.

High HLBS total score and subscale scores and SWLS scores indicate that individuals have more positive health behavior about healthy life style (Park, 2005). It is clearly observed that war and migration as multilateral social incidences bring along many problems certainly in terms of education and affect university students' life adversely.

When the general results of the present study are evaluated, it was observed that they were similar to those of previous studies, but the results of the students were very high before migration and very low after migration. The fact that the scores obtained before migration were significantly higher than the scores obtained after migration and a decreased was observed in scores later signified that the lives of students were rather adversely affected by the war and migration factors.

Conclusions

Serious adverse changes were determined in the healthy life style behaviors and life satisfaction of university students who migrated from Syria to Turkey due to the war.The fact that war severely impair individuals' mental health by causing such traumatic events, and migration process cause different problems for each individual and affects public health both directly and indirectly in an irrecoverable manner is under basic responsibility of healthcare professionals, especially nurses.

Since it is known that the individuals who have healthy life style behaviors have high quality of life, realize the health promotion and protection behaviors more easily and obtain life satisfaction, public health nurses whose priority is to perform health protection and promotion behaviors have important tasks and responsibilities in this case. Thus, it is very important for nurses to comprehend the importance of health promotion, perform motivating behavior for development of positive health behavior by individuals in the society, and develop educational programs in accordance with their needs by determining their current life style behaviors.

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