Analyzing the Impact of Peer Mentoring on Levels of International Student Wellbeing and Integration in Australia

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ABSTRACT

International students in Australia, do face several challenges when transiting to new schools and living in that country. Some students may be mentally ill, and this poses a great challenge to the students coping with domestic students. It is observed that since the introduction of peer mentoring as well as counseling in schools, there have been reduced challenges faced by the mentally ill international students in Australia. Little and quality research evaluating the social life, wellbeing, and integration of mentally ill international students have been done in Australia. Some show positive correlation while others negative correlation on the impact of peer mentoring and counseling towards the wellbeing and integration of mentally ill international learners. This then prompts a need to fill a gap between the practices of counseling and peer mentoring, wellbeing and integration of mentally ill international students within Australian schools. This research showcase the familiarities of 17 mentally ill international bachelor’s students from Melbourne University Australia. The students filled questionnaires during the first month after reporting school and three months later. The aim of the questions was to test for effects of peer mentoring and counseling for the levels of students well-being and integration. Results showed that peer mentored mentally ill students were five times socially integrated with the campus environment and had great satisfaction while studying as likened to non-mentored international students. Integration of students somewhat involved link concerning mentoring international scholars, mental illness and their social wellbeing at the University. By analyzing the control effects, the results showed that peer mentoring and counseling at Melbourne University would affect the students wishing to join universities in Australia. The discussion of the results based on the self-determination theory and wellbeing within Melbourne University as well as the methodology of research and the limitation of the study.

INTRODUCTION

In the wake of rising cases of mental illness cases by international students, Australian universities are experiencing this great issue and thus need for the matter to be categorized as a public issue. According to the Australian Education International, 80% of international students in Australian institutions were highly satisfied with the life experiences and could study well in Australia. However, several issues were noticeable with new international students studying there as they could experience homesickness, financial constraints, loneliness and culture shocks. These challenges would in one way or another lead to mental illness of international students as well as the challenges being encountered by those with the illness. The population of international students having financial constraint issues was 37% in Australia. Moreover, other hindrances to the social wellbeing and integration of local students and international students included language barriers, heavy assignments, the difference in culture, difficulty in communication as well as having good interactions with local students. There are other issues of the lecturer, having a difficult relationship with international students where there are issues of understanding the students’ expectations from the lecturer.

International students may also face academic shocks as compared to social shocks. Notably, students from Western cul-
Peer Mentoring

Most Australian schools offer peer mentoring programs to help undergraduate students as well as students in lower classes aiming to transition to university. The practice of peer mentoring programs is very helpful to mentally ill students as it helps them in learning coping ways in the new environment. According to Seltzer, peer mentoring was started through the perception that adults having certain incapacities and living freely as well as participate in community affairs can be good role models for young adults with similar disabilities seeking their help.

The peer mentor is helpful to people with disability as they offer emotional support and advise patients on how to deal with frustrations while adjusting to certain environments. Peer mentors help mentally ill individuals in transport issues, employment and education. They help disabled people cope and adjust to the disability as well as teach ways of managing leisure time fully and create time for social interactions.

According to Study, outdoor support therapy is one method of peer mentoring that is used by countries like Canada, the UK and the US in addressing the issue of mental illness and distress. This method was majorly used among present veterans. Bird reviewed some areas of veteran psychological treatment. In his literature, he examined the needs and problems such as retention, responsiveness, and reluctance when treating military officers and veterans. He also compared results by testing non-veteran and present veteran populations using a known POST program. Bird recommended need to research on the outdoor peer support role that it may play to the veteran population in Australia together with other veteran mental health services.

A review on improving the experience of international students in Australia showed major issues that students face ranging from the well-being, study work-life balance, health as well as acculturation. The study showed that there is under-utilization of peer mentoring and pastoral care services by students in Australia. An initiative on peer mentored embedded classroom was proposed to help international students within the university. The initiative was to help improve the wellbeing, acculturation, health as well as study, the work-life balance of international students [3].

The use of peer mentoring programs by well experienced mentoring students helps new students transiting to the university as they help in enhancing social interactions with other students. Thus, a need for social networks. A study of twenty-seven cases widened as it increased the intensity of culture shock.

Moreover, the international students do experience such feeling of lack of a sense of belonging, unfriendliness from the domestic students, isolation as well as powerless feelings. There are experiences of direct and indirect discrimination within and without the campus.

The above issues will deter the effective academic progress of students and create further disturbance in their minds. According to Rosenthal, physiological distress faced by international students is in the best way theorized within the stress and coping strategy framework. This framework is essential in the transition process for international students and also help with adaptive aspects in new environments. Australian research found out that when international students were asked about their well-being, they focused more on their physical health as well as healthcare instead of discussing their psychological and emotional symptoms related to mental illness cases. The Chinese students did fear to seek guidance and assistance from the counseling department as they felt shameful upon themselves as well as their parents [1].

It also point out that there is a poor health care service being received by international students and a poor health insurance policy that does not secure international students their health concerns. Moreover, several students did not have any know-how of what entailed the health insurance and all these issues affected students during their arrival and orientation stages in Australian universities. It is in this regard that the researcher sought to have an exhaustive study of mental illness of international scholars in Australia.

The researcher recommends the need for counseling and peer mentoring so as to improve the social wellbeing and integration of international students with domestic students in Australia.
The study also advocated for self-awareness amongst students and also be informed of the support services available within and without the university. Moreover, there was a need for availability of experts as well as policies on mental health to guide the staff and students with emotional challenges.

**Theoretical Framework for Students with Mental Illness as well as Mentoring Plans**

The self-determination theory and wellbeing best suits this study as outlined by Professor Ryan. The theory encompasses human motivation, wellbeing as well as personality development. This theory discusses self-determined behavior as we social, cultural conditions promoting the theory. The theory assumes a set of basic as well as universal psychological needs such as autonomy, relatedness, and competence. The fulfillment of these attributes is vital to enhance healthy living as well as human functioning irrespective of cultural stages of development.

Ryan also maintains that a person’s wellbeing does not depend solely on just being happy instead it is attributed to the importance, functioning and complementary approach to wellbeing. Autonomy, on the other hand, entails a reflection of awareness and self-determination theory do advocate for the part of mindfulness in self-directive and wellness. Under this theory, arise some minor theories related to self-determination. Causality orientation theory, basic psychological needs theory as well as cognitive evaluation theory does relate well to the psychological needs of mentally ill individuals. Causality orientation theory shows how different individuals relate to different environmental aspects in regulating behavior. Cognitive evaluation theory indicates how social aspects, as well as interpersonal integration, do facilitate or undermine intrinsic motivation. The theory also concerns factors like deadlines, pressure, rewards as well as feedback which affect feelings of competence and autonomy and can either improve or undermine intrinsic motivation. The basic psychological needs theory connects the notion of basic needs to wellness. It assumes that need is independent of the effects it has on wellness and, its impact on any behavior related to wellbeing is as a result of the link with need satisfaction. Basing on the above theoretical view of self-determination, several research hypotheses are to be assessed [4].

**Hypotheses**

1. Peer-mentored international learners had fewer chances of being mentally ill as well as high levels of social well-being and integration.
2. The influence of peer mentoring for mentally ill individuals shall be umpired by integration
3. Peer mentoring shall reduce the mental effect lapse of university students due to social well-being and integration.

**METHODOLOGY**

A quantitative and qualitative data analysis methodology was used in the research and a survey done that ensured open responses which were then statistically analyzed.

Data was collected basing on 17 international students from the University of Melbourne for three months. The variables that were measured involved self-determination as well as negative effects. Social support of the students was measured in the first month while the social support from the university was measured in the third month. Additionally, other measures done were loneliness, stress, social wellbeing, suicidal thoughts as well as integration.

**Sample and Procedure**

The study involved a sample of psychology students at the University of Melbourne. Some students were considered having passed through the peer mentoring programs while others have not passed through the peer training programs. The test was matched basing on the number of students with mental illness as shown in Table 1. Notably, more students were considered going to the peer mentoring lessons compared to those who did not attend the peer mentoring sessions [5-7].

<table>
<thead>
<tr>
<th>Students attendance</th>
<th>Peer mentoring classes</th>
<th>Nonpeer mentoring</th>
</tr>
</thead>
<tbody>
<tr>
<td>Due to mental illness</td>
<td>13</td>
<td>4</td>
</tr>
<tr>
<td>Due to loneliness</td>
<td>10</td>
<td>7</td>
</tr>
<tr>
<td>Due to suicidal thoughts</td>
<td>11</td>
<td>4</td>
</tr>
<tr>
<td>Due to satisfaction with school life</td>
<td>9</td>
<td>6</td>
</tr>
<tr>
<td>Due to negative effects</td>
<td>12</td>
<td>5</td>
</tr>
</tbody>
</table>

*Table 1. Peer mentoring attendance due to various concerns*

The choice of the students was based on how they attended the peer mentoring classes for a period of three months. It was recommended that all students with mental illnesses attend the peer mentoring lessons but not all attended. The study mainly focused on mentally ill students. Notably, some of the students declined to take part in the exercise, and they only constituted to 5%. This credited the analysis as it was not biased. 15 students had completed all the test questions and participated fully in the whole three months in providing essential information for the research. The questionnaires used in this study were collected and delivered in the paper format during the peer mentoring lessons with the consent of the university that participated. However, the
individuals could not be identified further beyond the objective of this research as names of students were optional [8-10].

The Mentoring Program

The program that was being evaluated in this research did focus on supporting and guiding the mentally handicapped individuals in being content and finding ways to stay safe as well as interact well with the international students and the domestic students. The students being researched were attending mentoring lessons, and a comparison of their behavior and the character was done with those who did not attend mentoring lessons. These mentoring tutors were professors from the institutions as well as volunteers who had undergone the mentoring program and passed well thus recruited to teach their peers. Besides being mentored, supported and guided on how to cope with other students and with the new environment as a mentally handicapped person, the mentees utilized he mentors to walk them around the institutions as well as guide them on academic matters [8]. There were challenges with attending the mentoring lessons as some students didn’t feel motivated along the way while attending the lessons and they were forced to quit attending the lessons. More so around 5% of the students did not attend these classes fully and could not see their mentors regularly as was when the program started.

Measures

The measurement for this study was selected by from students who were mentally ill and the study aimed to evaluate several aspects in regard students wellbeing as well as integration between international and local students [11-13].

Outcome Variables

The perceived stress is measured using the Perceived Stress scale. Students were asked if there were any possibilities that they felt anxious about some personal issues that would affect their academic work. The students were required to answer a yes or no if they felt anxious or stressed during the three-month period of this study. Ten students felt stressed while seven students felt okay and were not affected in any way. High scores of perceived stress indicated high levels of stress [14-16].

Loneliness

This factor would cause mental illness if not checked upon well students would answer yes or no if they were mentally ill. High scores meant most students would easily have a mental lapse due to loneliness.

Financial constraints

This factor also would cause mental illness if not checked upon, well. Students were supposed to answer yes or no if they were mentally ill. High scores meant most students would easily have a mental lapse due to financial constraints.

Satisfaction with school life

The University adaptation questionnaire was used to know the students the causes as well as the state of satisfaction in the school. The statement usually having 18 statements was used to gauge the students where if one indicated eight statements, it meant that they were satisfied with school life while ten statements meant they were not satisfied with school life [17].

Suicidal thoughts

Students were asked if, at any time in their school life, they ever thought of committing suicide and were to answer a yes or no. Most students had given that thought due to the problems they were facing in their daily school activities [9].

Negative effect

This was determined by use of the index of overall effect basing on wellbeing index scale. The students were to answer a yes or no. High scores of the test shown many had less Self-esteem and were negatively affected due to lack of peer mentoring as shown in Table 2 and 3.

<table>
<thead>
<tr>
<th></th>
<th>N</th>
<th>Minimum</th>
<th>Maximum</th>
<th>Mean</th>
<th>Std. Deviation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Respondents</td>
<td>17</td>
<td>1</td>
<td>17</td>
<td>9.00</td>
<td>5.050</td>
</tr>
<tr>
<td>Age</td>
<td>17</td>
<td>18</td>
<td>23</td>
<td>20.24</td>
<td>1.715</td>
</tr>
<tr>
<td>Valid N</td>
<td>17</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Table 2. Descriptive statistics.

<table>
<thead>
<tr>
<th></th>
<th>Age</th>
<th>Sum of Squares</th>
<th>df</th>
<th>Mean Square</th>
<th>F</th>
<th>Sig.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Between Groups</td>
<td>(Combined)</td>
<td>47,059</td>
<td>16</td>
<td>2.941</td>
<td>.</td>
<td>.</td>
</tr>
<tr>
<td></td>
<td>Linear Term</td>
<td>1.081</td>
<td>1</td>
<td>1.081</td>
<td>.</td>
<td>.</td>
</tr>
<tr>
<td></td>
<td>Deviation</td>
<td>45.978</td>
<td>15</td>
<td>3.065</td>
<td>.</td>
<td>.</td>
</tr>
<tr>
<td>Within Groups</td>
<td>0.000</td>
<td>0</td>
<td>.</td>
<td>.</td>
<td>.</td>
<td>.</td>
</tr>
<tr>
<td>Total</td>
<td>47,059</td>
<td>16</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Table 3. Anova test data analyses.
The Anova test showed a sum of squares of 47.059 between and within groups that attended peer mentoring lessons and those that did not. There was a discounting factor of 16 between groups where one was contrasted a 15 deviated. The mean square was 2.941.

This research encompassed various analysis steps. Chi-square did group the respondents into the observed and expected outcome. To determine the possible effect of peer mentoring and counseling on scholars wellbeing and integration was measured using regression analysis. Moderating variables were tested using one-way ANOVA [18-20].

ETHICAL CONSIDERATIONS

There was ethical authorization from the parties involved in this research. Confidentiality, as well as consent, was considered in this research. Identifiers were used in this study so as to ensure there is confidentiality.

RESULTS

The research involved the use of several analysis techniques. Among them is chi-square that was used to differentiate demographic representation of students basing on age, ethnicity, loneliness, gender, financial constraints, negative effects as well as mental illness. as shown in Figure 1.

Main Effects of Mentoring

Chi-square analysis results indicated that there was a link between peer mentoring and positive effects on mentally handicapped students (Kothari, 2008). Ratio showed that non-peer mentored students were 2.8 times more likely to have a mental lapse as compared to peer-mentored students. There was also a great significant variation of students who felt like committing suicide due to mental health issues and due to lack of peer mentoring as shown in Table 4.

![Mentally Ill * peer mentoring cross tabulation.](image)

**Figure 1.** Mentally Ill * peer mentoring cross tabulation.

<table>
<thead>
<tr>
<th>Count</th>
<th>Peer Mentoring</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>Mentally ill</td>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td>No</td>
<td>4</td>
<td>7</td>
</tr>
<tr>
<td>Total</td>
<td>7</td>
<td>10</td>
</tr>
</tbody>
</table>

Mediating Effects of Peer Mentoring

To test the possibility of mediating effects of international students adapting to live in Australian schools’ linear regression test was done. The test would test between peer mentoring and mentally ill students. The dependent variable is the mentally ill students while the independent variable is peer mentoring. The linear regression showed that peer-mentored students adapted quickly as well as would not have severe mental illness cases at the University of Melbourne. The values for the regression analysis showed an r of 0.52 and r² of 0.023.

Moderating Effects of Mentoring

The use of one-way ANOVA test using such variables as self-esteem, social wellbeing, and the negative effect was used to
test the moderating effect of mentoring. The results indicated a mean square of 2.941, with a discounting factor of 16 between groups where one was contrasted, and 15 deviated. This indicated that there was no major effect on self-esteem, negative effect as well as social wellbeing.

Literature shows that there was a decrease in self-esteem levels and social wellbeing due to lack of peer mentorship. Analysis of the results indicated that the moderating effects of self-esteem were less affected. Peer-mentored individuals had a high esteem and coped well, and chances of mental illness were low. Peer mentors did offer academic advice to mentees, information that was not easily known unless from textbooks. There was less social wellbeing among students due to lack of peer mentorship in the University of Melbourne.

Peer mentors will help students develop a sense of motivation to integrate more with other people and form a friendship. Peer-mentored international students did portray a decreased negative effect while non-peer mentored individuals had no effect or change between his three-month period.

The limitation of this research was difficulty in measuring experience of the mentees after undergoing the peer mentoring program.

Suggestions for Further Research

From the above research, it is notable that there is a need to carry out an assessment of the longitudinal framework over mentally ill students when they are joining the university. Students should be assessed before they join the university and consider such issues as self-esteem, loneliness, stress as well as possible worries. It is also recommendable to have a pre-university test of students to know those who are mentally ill so as to have a better focus on the matter.

CONCLUSION

The research paper has outlined that indeed there exist great advantages when using peer mentoring. Students have high integration levels, social well-being and fewer worries, stress and chances of mental lapse. It moderated the effect of mental illness on self-esteem, as well as negative effects. One would recommend more use of peer mentoring schemes so as to offer a solution to increased mental lapse of university students and increase integration among international as well as local Australian students.

REFERENCES


