



# SPEAKING YOUR LANGUAGE

PROMOTING MENTAL HEALTH AWARENESS  
AND SUPPORT FOR INTERNATIONAL AND  
STUDENTS NEW TO CANADA.

# ACKNOWLEDGEMENTS

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## ABOUT THE SPEAKING YOUR LANGUAGE PROJECT

Ryerson University, University of Toronto and OCAD University are developing, testing and sharing a model for collaboratively providing mental health services to culturally and linguistically diverse international students. Like all students, international students face various issues and challenges throughout their academic careers; however, evidence suggests that this cohort underutilizes mental health care supports available across campus compared to their domestic counterparts. Recognizing the impact differences in language and culture can represent in terms of a barrier to access and understanding, this program aims expand our mental health communities to include international students and new Canadians, increase intercultural competency of mental health care providers, and assist international students in connecting to services and supports.

This project is sponsored by the Ontario Ministry of Training, Colleges, and Universities Mental Health Innovation Fund. Information to be disseminated on the Centre for Innovation in Campus Mental Health website [www.campusmentalhealth.ca](http://www.campusmentalhealth.ca)

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# EXECUTIVE SUMMARY

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## BACKGROUND

The “Speaking Your Language” project aims to address the unique barriers that exist between international students with mental health challenges and their willingness to seek counselling from existing university support services.

## INTERNATIONAL STUDENT CHALLENGES

International students tend to underutilize mental health services despite the fact that as a population, they tend to experience more challenges, and display need for psychological assistance (Bektas, 2008). Common psychological stressors include:

- Homesickness and loneliness
- Culture shock
- Language barriers
- Financial barriers
- Dietary restrictions
- Social or cultural isolation
- Cultural misunderstandings
- Educational system adjustments
- Professors and counsellors who may not be culturally aware
- Racial discrimination or stereotyping
- Lack of support from domestic peers
- Housing difficulties

## PERCEPTIONS OF COUNSELLING

Researchers have surmised that cultural factors can have an impact on the perception students have about counselling and may restrain them from seeking support when they are in crisis. Generally speaking, international students typically have a negative view of counselling services (Alavi, Shafeq, Geramian, & Ninggal, 2014; Najmi, 2013; Nilsson, Berkel, Flores, & Lucas, 2004; Raunic & Xenos 2008).

While international students most often feel uncomfortable presenting depression or anxiety to counsellors, it seems to be culturally acceptable for some international students, particularly Asian students, to present with somatic or academic issues to medical health centers or academic advising departments (Raunic & Xenos, 2008).

Students consistently adopt familiar coping strategies that involved turning to friends and families rather than engaging with support structures at their universities. Some international students in this study reported that counselling was something that only weak or bad people needed. Other students could not see the value in discussing their issues with a white, western counsellor who in their minds, could not identify with their problems and cultural differences.

## RECOMMENDATIONS

- Train frontline staff to effectively support student with mental health challenges
- Provide cultural competency training to counsellors
- Encourage more collaboration between the counselling center and other post-secondary departments such as the international student support offices
- Assemble a team of domestic and international students to lead peer-based outreach programs or psycho-educational campaigns targeting international students
- Create testimonials from international students who have experience with mental health challenges
- Host information sessions about mental health support services later on in the term when students are likely to forget all the information they received during orientation
- Involve counsellors in more international student events so that students can establish personal contact, learn about their roles and functions, and gain understanding about help seeking and campus resources
- Utilize some form of a buddy system in which newly arrived international students are paired with domestic students
- Create non-threatening and non-stigmatizing marketing material for counselling services (i.e. videos or group tours)
- Set up group counselling for international students
- Advertise group counselling as skills workshops or discussion groups to encourage greater attendance because of the non-stigmatizing nature of the terminology
- Explain triage, confidentiality forms, and ethical boundaries to international students accessing counselling services for the first time to decrease drop out rates

Topics of group counselling discussion can include:

- *Cross cultural communication*
- *Language*
- *Friendship and dating*
- *Family pressures and expectations*
- *Gender roles*
- *Prejudice and discrimination*
- *Political and historical topics*
- *Nutrition and food*
- *Emotions*
- *Women's health*
- *Academic and career issues*
- *Stress management*
- *Immigration*

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# INTRODUCTION

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Studying abroad has become a popular option for individuals around the world who seek a unique post-secondary experience. According to the Canadian Bureau for International Education, Canada ranks as the world's 7th most popular destination for international students. Between 2003 and 2013, international student enrollment in Canada grew 84% with 290,000 students studying in 2013 (Canadian Bureau for International Education, 2014).

International students contribute political, social and economic benefits to the host country they study in. As such, it is in the best interest of post-secondary institutions to develop targeted support programs that enrich students' experiences at college or university (Ontario Undergraduate Student Alliance, 2012). These programs should aim to engage international students with their campus culture and services to aid them through their transitional stresses.

Currently, there are 12,607 international students studying at the University of Toronto, 2,000 at Ryerson University and 426 at Ontario College of Arts and Design University. The tri-campus Speaking Your Language project, developed to investigate and address the unique mental health challenges facing international students, therefore has the potential to aid and support 15,033 students across the three Toronto universities involved.

International students make up a diverse and complex population on post-secondary campuses. On one hand, as undergraduate students they may fit into the developmental stage of emerging adulthood (Arnett, 2000; Wintre, Kandasamy, Chavoshi, & Wright, 2015), struggling with similar challenges facing students from Western, industrialized countries (North American, European, Australian, and Israeli). On the other, they are faced with challenges akin to those of new immigrants. This intersection, confounded by their own culturally prescribed reactions to typical international student challenges, makes them a population vulnerable to heightened levels of mental health challenges.

The motivations and rationales for these sojourners, individuals who leave their home country to study abroad after finishing high school or college (Schwartz, Unger, Zamboanga, & Szapocznik, 2010), are varied. They include: goals for new experiences, educational quality and experiences, improved future career and immigration prospects, and qualities of the host country and institution (Li, 2014; Wintre, Kandasamy, & Chavoshi, 2012).

## THE "SPEAKING YOUR LANGUAGE" PROJECT

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Its aim is to address the unique barriers that exist between international students with mental health challenges and their willingness to seek counselling from existing university support services. This document aims to illuminate the influence a student's culture may play in their perception of their own mental health and also their approach to help seeking. It will also outline effective structure for group counselling as well as provide suggestions for awareness and outreach programs.



**15,033**  
INTERNATIONAL  
STUDENTS ACROSS  
**3 TORONTO**  
UNIVERSITIES

In many ways, international students are similar to their domestic counterparts in that they deal with many of the same challenges that accompany the transition to post secondary education (Mori, 2000). Difficulties can arise with the registration process, ensuring that they are taking the appropriate courses for their program, completing administrative tasks, and adjusting to class structure.

Wintre , Kandasamy, Chavoshi, and Wright (2015) suggested that for undergraduate international students, “the majority of the eight motivational reasons for studying abroad are directly comparable to the five hallmark features of emerging adulthood, namely, identity exploration, self-focus, instability, possibilities/optimism, and feeling in between” (p. 6).

Emerging adults (individuals aged 18-25) take more time to complete their education, to establish careers, become financially independent, marry and have children (Arnett, 2000; Arnett, 2012). While some international students are from Western industrialized countries, not all develop according to Western developmental stages. For this reason, it cannot be assumed that all students are in the same stage of identity development since some may come from countries whose social and economic setting have influenced their development in varied ways and as a result, they face challenges different from their domestic emerging adult peers.

Individuals from urban areas in Eastern countries like China and India might, however, also experience emerging adulthood and the challenges that accompany this stage. If professionals are choosing to adapt theories of emerging adulthood to people from other countries, they should consider the student’s unique cultural characteristics to ensure that their ethnic values are maintained within the adapted definition (Wintre et al., 2015).

Like many new immigrants, international students often arrive in a state of above average health that quickly declines (Newbold, 2005). Professionals should take note of this ‘Healthy Immigrant Effect’ when working with new international students, understanding that a large part of the decline in health may be due to a lack of community support and awareness of available services. Individuals new to their host country may also have a distrust of health systems, particularly if they believe that there are no culturally sensitive or appropriate services in place for them (Alavi, Shafeq, Geramian, & Ninggal, 2014; Najmi, 2013).

International students tend to underutilize mental health services despite the fact that as a population, they tend to experience more challenges, and display need for psychological assistance (Bektas, 2008). Common psychological stressors include homesickness and loneliness, culture shock, language barriers, financial burdens, educational system adjustments, and counsellors who may not be culturally aware or sensitive to the issues international students face (Dipeolu, Kang, & Cooper, 2007).

International students are significantly more likely to be hospitalized for psychiatric reasons, express suicidal ideation, and seek support from services when in crisis rather than as a preventative measure (Greenwood, Guglielmi, & Mitchell, 2007; Li, 2014). The research however, does not focus on students with cognitive disabilities or frame them as a population riddled with chronic mental illness (Greenwood et al., 2007). As such, support and treatment is addressed from a preventative lens, aiming to introduce students to counselling services before their stresses escalate.

Literature on international students’ help seeking behavior tends to highlight students from Asian countries, likely due to the fact that a large portion of international student populations are made up of students from countries like China and Korea. Much of the research discussed in this review focuses specifically on the differences in help seeking behavior between North American and Asian students, reflecting the challenges and miscommunication that may arise when supporting individuals from collectivistic societies versus those from individualistic ones. The wide breadth of information based on studies with Asian students helps illuminate the best practices for cultural competency for those working in the fields of student services and campus counselling, but the generalizations should end there.

This literature review will present background information on the general challenges international students may experience while studying abroad and when accessing support services. A discussion of the reported perceptions on Western counselling will cover utilization rates and reasons that students may have misunderstandings about Western counselling services, including culturally informed stigmas and lack of awareness. Best practices for cross cultural counselling and communication, followed by suggestions for setting up group counselling will highlight the need for professionals to acknowledge their own cultural influences and engage with the student population in sensitive and flexible ways. As international student support offices are typically the first point of contact and ongoing support, a discussion about engaging university support services will illuminate the importance of providing training to all front line staff. Staff training in cultural competency can ensure that professionals are able to introduce normalizing and non-threatening language about mental health into their existing conversations with students. A summary of research suggestions for improving the marketing for counselling services and the creation of outreach programs will support the notion that existing campus supports may only need to be re-focused to better incorporate international student populations. Finally, a concluding discussion on the strengths of students, post-secondary institutions, and literature will be contrasted with limitations and suggestions for improvement.

While this document can serve to highlight general information about international students and the various challenges they face, it is necessary to acknowledge the vast influence that an individual's cultural, social and political experiences have had on their identity and wellbeing. When supporting international students, it is best to keep their general transition and mental health challenges in mind while being aware of the diversity that may not be represented in the literature.

# BACKGROUND

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First and foremost, international students are highly motivated, focused, and choose to study abroad to further their education. In a study on international student motivations for studying abroad, 78.1% listed 'education' as their main reason (Wintre et al., 2015). Similar to their domestic peers, international students need to adapt to their new educational and social environment. For them however, the transition to an institution of higher education comes with additional stressors due to demands for cultural adjustments (Dipeolu, Kang, & Cooper, 2007; Hwang, Bennett, & Beauchemin, 2014; Mori, 2000; Popadiuk & Arthur, 2004).

The challenges for international students can be broken down into a few major themes. Primarily, international students face linguistic, academic, interpersonal, financial, and intrapersonal problems that are unique sources of stress during their adjustment period (Mori, 2000). Challenges can also arise around culture, accessing university services or programs, and finding fulfilling and sustainable employment (Wintre, Vigor, Chavoshi, & Wright, 2013).



*Linguistic*  
*Academic*  
*Interpersonal*  
*Financial*  
*Intrapersonal*

(Mori, 2000).

Linguistic challenges may be at the forefront for some students, affecting both their social lives and their academic achievements (Wintre et al., 2013; Yeh & Inose, 2003). Most students reported that they hoped to make friends with domestic students, however, many may feel cautious about approaching their peers due to the fact that they may not have the appropriate language or cultural skills that they need to form lasting bonds (Hwang et al., 2014; Rajapaksa & Dundes, 2002). Similarly, students with poor language skills can have difficulty understanding their professors and feeling comfortable contacting them to

ask questions or to voice their concerns (Hwang et al., 2014; Mori, 2000). A student lacking confidence in their language skills is also less likely to seek mental health counselling for fear that they will be misunderstood or that they will not be able to communicate with their counsellor (Carr, Koyama, & Thiagarajan, 2003; Lee, Dichtman, Fong, Piper, & Feigon, 2014).

Unsurprisingly, as most international students' tuition is significantly higher than that of their domestic peers (Bradley, 2000; Greenwood et al., 2007), international students have shown to be highly concerned about their both their financial situation and academic achievement. Volatile international money markets and exchange rates can destabilize a student's financial situation, and students are often disappointed to learn they are not eligible for the financial assistance available to domestic students. It is worth noting that these students deal with the pressures of balancing their changing sense of identity and the often-unrealistic expectations held by their families. Some students may feel obligated to make certain decisions about their academic and personal lives based on the expectations of their families, who invest so heavily in their education (Russell, 2008). For this reason, students may find it difficult to justify taking time out of their studies to foster new friendships and to commit to a counselling relationship.

In 2002, Tseng and Newton categorized the specific adjustment challenges international students face into four main categories. 1) General living adjustment, such as becoming accustomed to life in the host country and its food, housing, environment, and transportation; 2) academic adjustment, marked by an adjustment to the host country's university system and the skills needed for success; 3) sociocultural adjustment, involving cultural norms and behaviours; and 4) personal psychological adjustment, which includes overcoming feelings of homesickness, loneliness, isolation or lost identity (p. 591-592).

As mentioned, some of students' primary concerns revolve around Tseng and Newton's second category of academic adjustment. Building new skills to help with their adjustment to the overall structure of the educational institution seemed to be a top priority for many students (Andrade, 2006; Smith & Khawaja, 2011).

Regardless of their existing attitudes towards counselling, when international students experienced high levels of academic stress (ex. around exam periods), they seemed more willing to seek help from a counsellor (Li, Wong, & Toth, 2003). Constantine, Kindaichi, Okazaki, Gainor, & Baden (2005) reported that while many Asian, Indian, Japanese, Korean and Vietnamese international college women might not have sought mental health counselling to help with their adjustment problems, they were willing to seek academic or career counselling to address the stresses related to their academic and career concerns.

Khawaja and Stallman (2011) echoed the notion that international students' unique challenges could contribute to adjustment difficulties and have a negative impact on their learning and well-being. They suggested, that "not feeling included, accepted, or understood by their domestic peers and host society can disrupt their adjustment process and lead to emotional problems, highlighting the importance of social support for this population" (p. 204). These varied interpersonal stressors have been found to exacerbate stress in other areas of international students' lives, especially causing emotional challenges. They also found that how students cope in response to these stressors can have an impact on their health outcomes and that often, these coping strategies are defined by the students' cultural background.

"Asian cultures, for example, may be less inclined to seek professional help and be more likely to use more maladaptive coping strategies such as repression, avoidance and other passive coping strategies. These types of strategies are associated with poorer health outcomes. Resultant negative thoughts and beliefs and poor coping behavior can lead to an increase in overall stress levels. As a result, international students have reported psychological problems, such as depression, worry and stress as well as somatic or psychical complaints such as appetite, fatigue, and sleep problems."

(Khawaja & Stallman, 2011, p. 204,)

Aside from their primary challenges, international students have also been found to encounter accommodation difficulties, dietary restrictions, social or cultural isolation, cultural misunderstandings, racial discrimination or stereotyping and lack of support from their domestic peers (Yakunina, 2010). Dealing with these issues while experiencing culture shock, that leaves students lacking a point of reference for learning social norms and rules to guide their actions and understand others' behaviour (Bradley, 2000), can have a detrimental effect on an individual's well being.

The literature portrays international students as a population vulnerable to mental health challenges because they face extreme transitional difficulties and does not focus on students with cognitive disabilities or chronic mental illnesses. Students tend to be concerned with their experiences of depression, lack of assertiveness, academic challenges, and feelings of anxiety (Hwang et al., 2014). It is evident that the main difference between international and domestic students is that both populations continue to report a need for counselling services but international students are unlikely to actively seek help.

# PERCEPTIONS OF COUNSELLING

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“ The students were extremely reluctant to use the University Counselling Service- saw it as having a stigma attached as well as the very public entrance to the office ”

- *A counselling supervisor at a university counselling center*  
(Bradley, 2000, p. 424)

Generally speaking, international students have a negative view of counselling services. Researchers have surmised that cultural factors can have an impact on the perceptions students have about counselling and may restrain them from seeking support when they are in need. (Alavi et al., 2014; Najmi, 2013; Nilsson, Berkel, Flores, & Lucas, 2004; Raunic & Xenos 2008).

A study on the use of counseling services among international graduate students reported that 44% of the participants had had an emotional or stress related problem that significantly affected their well-being or academic performance over the course of a year. However, fewer international students considered using mental health services than domestic students (33% vs. 56%) and only 17% of international students reported that someone had suggested that they seek counselling compared with 28% of the domestic population. While 33% of this particular population said that they would consider seeking counselling, only 17% reported actually using on-campus services (Hyun, Quinn, Madon, & Lustig, 2007).

Hwang, Bennett, and Beauchemin (2014) suggested that students might be underutilizing mental health services because of stigmas they hold about seeking help, because they are unaware of the services, and because there is a lack of culturally appropriate services. They noted that of the major studies done on the underutilization of counselling services by international students, the literature has produced inconclusive results due to small sample sizes and contradictory findings in retention rates after the first counselling session (p. 348).

While research may be limited, it is certain that this vulnerable population is less likely to seek help from counselling services for a number of reasons. Najmi (2013) organized the factors that influence international students' perceptions of counselling and their decisions to seek counselling into three categories: personal, socio-cultural, and agency factors. Personal factors refer to personal characteristics and situations that can influence perceptions of counselling. These can include a student's unwillingness to seek counselling based on the belief that they can solve their own problems.

Socio-cultural factors deal directly with both the students' cultural values as well as the society and culture of their host country. Students may be deterred from counselling based on their counsellors' religion, gender, race, and ethnic background (Setiawan, 2006). Alavi, Shafeq, Geramian, and Ninggal (2014) suggested that students may come from a culture that encourages discussions regarding mental health and emotional turbulence be kept within the family and friends circle. For this reason, many international students feel uncomfortable receiving one-on-one counselling from a stranger in a structured therapy setting. Students who come from such a collectivist culture tend to be dependent on their social group which may cause them to feel embarrassment, shame, and stigma when seeking counselling (Li, Wong, & Toth, 2013; Setiawan, 2006).

Popadiuk and Arthur (2004) similarly found that students consistently adopted familiar coping strategies that involved turning to friends and families rather than engaging with support structures at their universities. Some international students reported that counselling was something that only weak or bad people needed. Other students could not see the value in discussing their issues with a white, western counsellor who in their minds, could not identify with their problems and cultural differences.

It seems to be culturally acceptable for some international students, particularly those from Asian countries, to present with somatic (physical symptoms) or academic issues to medical health centers or academic advising departments (Raunic & Xenos, 2008). Popadiuk and Arthur (2004) suggested that for non-western societies, stress is primarily manifested in the body and that students will seek academic

help or present to medical clinics for advice and medication, rather than admitting weakness or losing face. Presenting with a body part as a cause of distress is said to be culturally determined and can allow the student to avoid feeling ashamed or socially isolated by experiencing a mental illness. Students from cultural backgrounds that discourage help seeking for mental health challenges often suffer from psychosomatic symptoms such as anxiety, gastritis, headaches and insomnia. Other physical symptoms such as stomach-aches, indigestion, weight-loss, fatigue and sleep problems may act as metaphors for Asian students' emotional or interpersonal problems (Carr et al., 2003; Harik-Williams, 2003).

Lee et al. (2014a) looked at the factors influencing Korean international students' preferences for mental health professionals and found that this population may be more likely to "delay seeking services, terminate treatment prematurely, and hold negative attitudes toward counseling when compared to their Western counterparts" (p.105). In this analysis, Korean students expressed that they would be more comfortable with mental health professionals who could speak the same language as them and/or shared a similar cultural background. Lee et al. suggested that this could be due to the student's perception that sharing a cultural background gives their practitioner a greater understanding of their issues and that they will be treated with more empathy.

Finally, agency factors include a "lack of knowledge about the existence of counselling services, confidentiality concerns, counsellor ability to help, cost of services, and long wait times" (Najmi, p. 28, 2013). Alavi, Shafeq, Geramian, and Ninggal (2014) stated that in other instances, international students from non-western cultural backgrounds may be unwilling to admit that they are in need of professional help due to their own misunderstandings of counselling. They could believe that they run the risk of ruining their student status, that their attendance will appear on their academic transcript or that they will somehow tarnish the reputation of their home country. Students from a non-western cultural background may also be unfamiliar with having a counselling center located on their university campus and may simply have little or no information about the university support services

available to them (Alavi et al., 2014; Popadiuk & Arthur, 2004; Russell, 2008). Due to the increasing amount of attention that post secondary institutions are paying to students' mental health, it would be interesting to know whether or not students who report not having information about counselling services actually haven't been informed or if they simply feel more comfortable stating this as the reason for not reaching out for help.

## **International students' perceptions of counselling and their decisions to seek counselling**

### **- 3 CATEGORIES:**

#### **PERSONAL**

- I can solve this myself.

#### **SOCIO-CULTURAL**

- In my culture we don't talk about mental health.
- We keep our problems within our family.
- Mental illness is a weakness.

#### **AGENCY**

- What resources are available?

# CROSS-CULTURAL COUNSELLING

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Counselling services can contribute to the marginalization of international students through misunderstandings of their cultural backgrounds, lack of understanding about transition issues, and lack of coordination with other areas of campus to address students' needs that could be met through counselling (Popadiuk & Arthur, 2004).

Research on international students often reports specific counsellor qualities and best practices that are deemed effective with all individuals, yet it is important to remember that this is a heterogeneous population and not all international students will respond according to therapeutic structures dictated by literature.

“Intrinsic to cultural sensitivity and cultural empathy is attaining comprehensive knowledge about these students' culture of origin and unique client-specific data, both of which can be attained through professional and popular literature related to these cultures, multicultural coursework, receiving multicultural supervision, the establishment of meaningful friendships or relationships with individuals from these cultural groups, consultations with multicultural counseling experts, and conversations with clients from these groups about relevant cultural issues”

(Constantine et al., 2005, p. 173)

Researchers urge mental health professionals to notice that literature tends to make these students appear more homogenous than they actually are (Popadiuk & Arthur, 2004; Yau et al., 1992). Given the number of countries and cultures represented in international student populations, mental health practitioners can benefit from having general knowledge about transition issues, but must be prepared to assess and address the unique experiences of individual international students. Treating students as a homogenous group ignores issues of gender, culture, and power and places individuals at greater risk for marginalization within the university (Najmi, 2013; Popadiuk & Arthur, 2004). Counsellors should focus on the uniqueness and diversity of clients' preference for counselling even within their cultural group.

As discussed, the under-utilization of counselling services can be attributed to a variety of factors; however, not yet examined is the fact that an international student may have had a prior negative experience with counselling or that the student perceived the professional as untrustworthy and undesirable as a counsellor (Nilsson et al., 2004).

Generally, international students expect that counsellors respect and appreciate an international student's culture and are willing to learn more about it (Najmi, 2013). Counsellors should assess for international students' access to close support networks, assist them in identifying where possible connections can be made or strengthened and encourage creative approaches to maintaining meaningful relationships with others (Greenwood et al., 2007). Yau, Sue, and Hayden (1992) found that the preference for a particular style of counselling could change over the course of the counselling period, after trust and rapport have been established. In this study, Asian clients reported that both styles of counselling, client centered and problem solving, were helpful and that the approaches complemented one another. The study concluded that contrary to what they expected, Asian international students did not always want a directive approach to counselling.

When asked which characteristics they'd prefer their counsellor to have, international students responded that they wanted counsellors to be honest, genuine, trustworthy, accepting, warm, interpersonally skilled, and empathic – illuminating the importance of sincerity in the counselling relationship (Bradley, Parr, Lan, Bingi, & Gould, 1995).

Yakunina (2010) reminded that facilitators must keep students' preferred communication styles in mind during counselling. In some cultures (Asian and Latin American) individuals are expected to communicate indirectly and display emotional self-control while other cultures (European, Canadian, Australian) encourage direct emotional expressions. If counsellors actively address these differences with sensitivity and tact, the discussion can provide opportunities to work through potential cross-cultural misunderstandings.

Lee, Chan, Dichtman, and Feigon (2014a) found that Korean international students displayed a preference for mental health professionals with ethnic similarity over those with ethnic dissimilarity.

The results of this study found that Korean international students also favoured older mental health professionals (viewing them as more experienced and competent) and thought of the counsellor as an authority figure who would prescribe clear-cut solutions for their problems.

Nilsson, Berkel, Flores, and Lucas (2004) argued that

“counselors working with clients who are culturally different from them should demonstrate cultural sensitivity and multicultural counseling competence by being aware of the implications of their own culture and possess knowledge about the culture of the individuals with whom they are working.”

(Nilsson et al., p. 55, 2004)

It is crucial that therapists be aware of their own culture, cultural biases and values (Gopaul-McNicol, 1998). Popadiuk & Arthur (2004) cited that multicultural counselling competencies can be broken down into the following four domains.

### **Self-awareness**

- Being mindful of cultural influence on their own beliefs and values
- Recognizing and acknowledging cultural differences
- Being aware of reciprocal influences of culture within the therapeutic relationship
- Understanding how culture impacts worldview and how it impacts the counselling process

### **Knowledge**

- Knowing how culture influence the counselling process and outcome
- Understanding counselling practice values associated with specific cultural groups
- Learning specifically about culturally diverse populations
- Direct experience with and exposure to people of different cultural backgrounds

### **Skills**

- Developing skills through cross-cultural practicum placements and supervision
- Developing strategies to overcome cultural barriers
- Accessing culturally appropriate resources for consultation and supervision
- Utilizing basic counselling abilities including a strong therapeutic alliance, empathy, and support

### **Organizational development**

- Expands counsellors' roles from working directly with international students to impacting the policies and operations of educational institutions

Along with having a counsellor that was culturally competent, international students reported wanting practical information and to learn relaxation skills (Bradley et al., 1995). Students in one study (Bradley et al., 1995) were slightly positive about learning to express their feelings more freely, about examining their values and about being more assertive. They were neutral to slightly favorable about changing their self-talk, understanding their past and changing how they relate to others. They felt negatively about examining philosophical issues and the meaning of life, or exploring their religious convictions. In the twenty years since Bradley et al.'s study, international students continue to report wanting practical problem solving skills and ways to manage their anxiety (Hwang et al., 2014). A study examining Korean students' preference for counselling professionals showed that these international students also preferred counsellors who were trained at prestigious institutions, highlighting Korean students' reverence for professionals who acted more like experts than collaborators (Lee et al., 2014a). It would seem that having experts introduce and teach practical life skills to aid students in their transitional is valuable to this population.

Since many of these students can experience difficulties adjusting to their host culture, counsellors should aim to help international students gain awareness about the significance of culture in terms of their adaptation challenges (Bektas, 2008). Normalizing the experiences of unhappiness, loneliness and frustration when acclimating to a new culture may help students deal more positively and conceptualize their experiences more constructively (Bektas, 2008).

As many international students experience the same adjustment problems and may feel uncomfortable in traditional one-on-one therapy environments, researchers have reported group counselling to be an effective way to reach out to this population (Carr et al., 2003; Dipelou et al., 2007; Yakunina, 2010).

# GROUP COUNSELLING

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For most individuals, having links to their cultural heritage is associated with lower stress (Bektas, 2008; Lee, Koeske, & Sales, 2004). Bektas (2008) noted that it is important to understand the significance of co-national (peers sharing the same nationality) support for international students since co-national networks can provide emotional benefits, permitting or even encouraging the release of frustrations concerning life in a new environment.

In a 2003 article on a women's support group for Asian international students, Carr, Koyama, and Thiagarajan suggested that the strong social ties international students created during their participation in the support group made their adjustment easier. The support group can also become a setting for socializing, practicing English language skills, addressing academic, personal and social concerns, and acculturation stresses. Importantly, it also becomes a place for students to receive support from culturally sensitive counsellors (Carr et al., 2003; Yakunina, 2010).

Carr et al. reported that at their women's support group for Asian international students, "counselors encouraged group members to express their feelings in their first language" (p. 132). They would then have other members of the support group help find the proper English phrases or statements to express their feelings because the students' native tongues often had no equivalent English words to help them express their emotions directly.

[The group offers] "advantages over individual counselling because groups can instill hope, modify feelings of being alone in their sufferings, impart information, assist students to feel needed and useful, develop socializing techniques, interpersonal learning, and create group cohesion."

(Carr et al., 2003, p. 132)

Carr et al.'s open group, run by two facilitators, met once a week for 90 minutes at the university counselling center library and covered a variety of topics. Yakunina

(2010) supported the act of having groups meet outside the typical counselling center citing that even locations could contribute to students' existing stigmas. For Carr et al.'s group, students did not need to be registered with the counselling center to attend the group and did not have personal charts unless they sought individual counselling. Yakunina stated that while open groups may work for some, closed groups have the benefit of consistent membership and same country groups may result in high levels of cohesion and commitment.

After an icebreaker question concerning one weekly positive and one troubling experience, Carr et al.'s facilitators would engage students in discussions with no set agenda.

## **Topics of discussion included:**

- Cross cultural communication
- Language
- Friendship and dating
- Family pressures and expectations
- Gender roles
- Prejudice and discrimination
- Political and historical topics
- Nutrition and food
- Emotions
- Women's health
- Academic and career issues
- Stress management
- Immigration

Both Carr et al. and Yakunina warned that western concepts of confidentiality must be carefully explained and discussed and that students must be reassured that anything discussed within the group will not be shared with individuals on campus or with anyone from their home country.

Issues may also arise during casual encounters in public settings like grocery stores or restaurants. Carr et al. warned that seeking mental health services can make students feel a sense of shame and that in order to not perpetuate their stigma, it is important for co-facilitators to not minimize or avoid interactions during public encounters. "Engaging in casual conversations in stores, for example, contributes to making personal connections that seem to be a key to reaching out to international students (Carr et al., 2003, p. 133)"

Understandably, support groups offer international students a space in which they can learn to bridge their home and host cultures all while building their social skills and improving their language abilities. Dipeolu, Kang, and Cooper (2007) agreed that support group counselling can provide the supportive context students need to discuss adjustment concerns, helping them normalize their experiences and reduce feelings of isolation.

Labeling a counselling group as a discussion group or skills workshop rather than using vocabulary pertaining to mental health can reduce the stigma for international students seeking assistance (Dipeolu et al., 2007; Yakunina, 2010). Dipeolu et al. offered a breakdown of one counselling center's experience with group counselling for culturally diverse international students.

Prior to Dipeolu et al.'s 'support group's' first meeting, co-leaders prepared topics for discussion to reduce initial feelings of awkwardness and model the type of discussions that would continue throughout the sessions. Initial meetings were dedicated to members getting to know each other and reviewing information that they had discussed during pre-group interviews. By the sixth and seventh session, co-leaders encouraged students to frame attending group as self-care and explained that self-care promotes academic success, thereby lessening feelings of guilt some students may have experienced by taking an hour to attend group rather than study.

It is interesting to note that the co-leaders for Dipeolu et al.'s support group were international students themselves, which helped frame facilitators as collaborators of the group rather than as evaluators. Dipeolu et al. stated that this fostered comfort and freedom for students to explore various issues.

## Challenges that emerged over the course of the support group:

- Audio taping the sessions and having it inhibit members' activity or attendance
- Members not attending due to their commitments to studying
  - | *Emphasizing the balance between academic success and self care*
- "American bashing" discussions
  - | *Learning to help group members express their frustration in their host country without personalizing the negative experience*
- Preventing the group from turning into a chat/social group
- Ethical issues of boundaries
  - | *Group members asking co-leaders for a lift home and having to figure out how to respond appropriately*
- Therapist client relationship: ethical issues
  - | *How to interact with group members outside of group*
- Time limitations

**Below is a list of recommendations co-leaders had after reflecting on their experience with their support group.**

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## **GETTING STARTED**

1. It is very important to collaborate with various offices on campus who interact with international students on a regular basis. Possible questions to address are: Would these offices be interested in helping with advertisement? Would they share mailing lists?
2. It is helpful for advertisements to be perceived as invitations.
3. Format and goals of the group should be clear from the start.
4. A nontraditional screening approach might be preferable.
5. Using family metaphors to describe group concepts is helpful.
6. During pre-group interviews, it is helpful to indicate that issues such as immigration and legal matters are handled through a different campus office.

## **GROUP STRUCTURE**

1. Consideration should be given to conducting a gender-specific group.
2. Consideration should be given to holding the group in a comfortable room outside the Counselling Center.
3. It is believed that having co-leaders who were also international students was quite helpful. If possible, it may be beneficial to have at least one of the group leaders represent an international country whether they are staff, intern, or graduate student.

## **GROUP STAGES AND PROCESS**

1. Have topics for discussion prepared before the first group to facilitate group discussion.
2. Look for opportunities to highlight the universality of experiences.
3. Do not assume that when a member misses a group session that they do not value the group; it may be that academic priorities took precedence.

4. Co-leaders must find a way to balance support for the student's academic success while promoting self-care.
5. For co-leaders, there will be frequent challenges between Western definitions of group concepts and counselor/client relationships and non-Western understanding of these concepts and relationship.
6. It is useful to distribute a follow-up questionnaire in order to obtain feedback regarding group members' experiences and suggestions for future groups.

## **GROUP SUPERVISION**

1. It is important that the supervisor is invested in this student population and recognizes the value of and need for this group.
2. If supervisees are international students, recognize parallel processes; that is, it may be helpful to frame supervision as a supportive and collaborative rather than evaluative experience.
3. Help co-leaders to anticipate ethical issues up front.
4. Encourage discussion of co-leaders' cultural frames of reference.
5. Helpful mindset for supervisor and supervisees: Know in advance that this group will take time to get started; patience and persistence

(Dipeolu et al., 2007, p.71-72)

Apart from having culturally competent counsellors, the literature highlights student services as key influences in this population's adjustment and overall experience. International students look to their international advisors to support them through their challenges. This puts staff in international student support offices in the ideal role to introduce conversations about mental health, the reality of counselling services, and the availability of on-campus resources.

# ENGAGING UNIVERSITY SUPPORT SERVICES

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“When international students arrive to their main destinations, the international student office is the first place they go on campus as a source of support and guidance...The international student office’s job is to protect and help international students throughout their educational life in the university. This office is the first port of call for most international students, with or without problems, and should be an office that every international feels at home and welcome in despite any concerns or difficulties. This office should also be the focal point for international student activities, academic or non-academic, and actively coordinate with other offices to facilitate and/or resolve problems.”

(Tas, 2013, p. 14)

As mentioned, many international students feel uncomfortable seeking help directly from counselling centers due to their culturally learned understandings of what counselling is. Alavi et al. (2014) noted that most young people, not just international students, do not like to be seen by their friends as having mental health problems and that the stigma can be related to the fear of a lack of confidential services.

Greenwood, Guglielmi, and Mitchell (2007) offered that this cultural mistrust students’ hold or the perception that their problems are only academic and not personal in nature, likely deter them from choosing to access counselling services. They suggested that it is important to form alliances with international student leaders, offer academically centered support groups in non-counselling spaces, and advertise the services in international student support offices (p. 128).

Hwang et al. (2014) found that females were more likely to access counselling services than males, but that international male students were more likely to access counselling than their male domestic peers. They posited that this slightly higher male utilization rate may be related to higher rates of male student enrollment, male international students experiencing more difficulties than domestic males, and having more referrals of male international students made by various campus offices.

It is essential to incorporate academic and non-academic needs into existing cultural and social activities. These activities can facilitate adjustment and socio-cultural adaptation for those international students who may develop more serious mental health challenges if they are not properly supported during their transitional difficulties (Tas, 2013, p. 15). Advisors, working with faculties and also in international student support offices, are responsible for directing new students to the appropriate resources on campus, and as such, need to be able to engage in non-threatening conversations about mental health (Hyun et al., 2007).

While typically informed of crisis situations, advisors are “often unaware of the subtle manifestations of emotional problems that may reflect cultural differences and the sensitivities of expressing and detecting emotional problems” (Hyun et al., 2007, p. 110).

Bradley (2000) found that cultural differences between staff members and international students can both mask symptoms and also create a false experience, causing international students to feel marginalized and isolated by the cultural exchange. Bradley encouraged that training programs be created to enable staff to respond in a sensitive and appropriate way and so that existing sources of campus support can be identified, resourced and provided in a way that is informal and non-threatening.

Since this population is generally less aware of on-campus counselling, it is clear that adequate information during orientation and administrative support for international students are key factors to successful transitions. It is equally important that students are introduced to knowledgeable counselling staff members who are able to address students' questions and mental health concerns. Due to their reliance on team members of international student support offices, advisors are in the ideal position to transmit this information and make soft introductions through outreach and programming (Lee et al., 2014b; Li, 2014).

At one university, special efforts were made to help international students be more aware of mental health discussions and counselling services, by hiring a counsellor with international student expertise to help coordinate international student counselling programs and services. The counsellor attended many international student organization activities and served as a mentor to the students and as an advisor to international student organizations (Yi, Lin, & Kishimoto, 2003).

In a study of international students' experiences and interactions with student services, Li (2014) encouraged student services departments to collaborate, share information and learn from one another about how best to support this population. Li argued that student services enrich an international student's experience by helping students gain a better understanding of their *situations* and *selves* and contributing to the *support* and *strategies* that relate to their transitional challenges (p. 44).

International students are often unaware of the specifics of their health insurance plans, what services are covered and the proper steps for making claims. Counsellors and staff advisors alike need to be trained to answer questions regarding insurance. The majority of students will not know about the differences in cost between seeking counselling on or off campus, and the differences in coverage for treatment from social workers, psychotherapists, psychiatrists, psychologists, counsellors and counselling psychologists.

Li found that international students felt that their universities could do more to market support services to students more effectively. Students were most frequently referred to counselling by faculty and staff, illuminating the continuing trend of international students' help seeking behaviour (Hwang, 2014, p. 351). Students tend not to seek help themselves, and rely on referrals made by authority figures, suggesting that counselling centers need to collaborate with other campus departments to reduce stigma and increase outreach. Unsurprisingly, students are more likely to attend counselling if they've known a friend or upper year student who has accessed counselling services in the past and is willing to make the referral (Russell, 2008).

# OUTREACH PROGRAMS

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It has been recommended that post-secondary institutions organize peer-based outreach programs or psycho-educational campaigns for international students to further support incoming students' cultural adjustments and transitional experiences (Bradley, 2000; Canadian Association of College and University Student Services & Canadian Mental Health Association, 2013; Li et al., 2013; Nilsson et al., 2004;). Many campuses already have teams of upper year students organizing support events, however, discussions of mental health are mainly facilitated by health promotions teams and other specialized student groups. Mental health outreach programs for international students might be more effective if they are created in collaboration with international student support offices and aim to include the mental health discussion within a larger discussion aimed at easing common transitional issues.

Upper year or already acclimatized international students are in the best position to act as student ambassadors, advertising counselling support groups and other services available on campus while also providing social support. (Bradley, 2000; Nilsson et al., 2004; Russell, 2008). Constantine, Kindaichi, Okazaki, Gainor, and Baden (2005), however, pointed out that international students tend to socialize primarily in limited groups of same-ethnic peers even though close relationships with domestic students often predict better cultural adjustment. Knowing that international students cite their lack of domestic friendships as a major stressor throughout their post-secondary careers, flexible initiatives could include student ambassadors from both the international and domestic populations so as not to further isolate international students from the rest of the student body (Bradley, 2000).

Popadiuk and Arthur (2004) encouraged the use of peer led awareness campaigns to draw students' attention to university support services, the location of the counselling center and to provide proper explanations of what counselling is and what students can expect if they choose to attend. Student ambassadors can also be responsible for creating multi-language flyers advertising support groups, speaking to incoming

students about having used and benefited from counselling or developing novel ways to promote and de-stigmatize mental health services. Russell (2008) agreed that approaches created by peer mentors can capitalize on and strengthen relationships among international and domestic students, opening up possibilities for conversations about normal issues and can foster helpful problem solving.

## **Some of the main outreach ideas found in the literature are listed below:**

- Create testimonials from international students who have experience with mental health challenges
- Have ambassadors act as trained peer-counsellors outside of the counselling center
- Host information sessions about mental health support services later on in the term when students are likely to forget all the information they received during orientation
- Involve counsellors in more international student events so that students can establish personal contact, learn about their roles and functions, and gain understanding about help seeking and campus resources
- Advertise group counselling as skills workshops or discussion groups to encourage greater attendance because of the non-stigmatizing nature of the vocabulary
- Utilize some form of a buddy system in which newly arrived international students are paired with domestic students
- Encourage more collaboration between the counselling center and other post secondary departments such as the international student services
- Market counselling services through videos or group tours

With our changing technology and the rise of social media, post-secondary institutions are now able to connect with students directly, and can benefit from engaging students in online discussions of mental health. Russell (2008) pointed out the powerful roles of friendship and the university's website or online presence. Departments or student groups can use webpages and social media platforms to post informative articles, anti-stigma messaging, and contribute to non-threatening and normalizing conversations.

While it is vital that post-secondary institutions aim to de-stigmatize the experience of living with mental health challenges and create campus wide awareness, Nilsson et al. (2004) noted that when dealing with issues like depression, anxiety, loneliness – all often experienced by international students – counselling staff should carefully evaluate the potential risks and benefits of addressing these issues in public formats. Challenges may arise if a student feels that the issues are not being addressed with enough care or if they disclose personal information to someone who is poorly equipped to respond to them.

Effective mental health awareness campaigns are grounded in the notion that seeking help is empowering rather than shameful. International students are particularly in need of education that shifts this stigmatized thinking and peer mentors, student service staff, and counselling departments already have the tools necessary to strengthen this messaging on post-secondary campuses.

# CONCLUSION

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The literature paints a picture of international students as individuals who struggle to transition to Western culture and their post-secondary education. These are students who leave their homes and support systems in search of new experiences and along the way, develop typical stresses in response to challenges similar to those of their domestic peers but also those of new immigrants. They represent a population struggling to maintain a sense of self during a time of intense personal transition and the lack of familial and social support, coupled with language, academic, and financial difficulties can exacerbate their normal reactions to stress.

International students are less likely to access support services like on-campus counselling than their domestic peers. They may hold culturally influenced misconceptions about what mental health means, what counselling consists of, or they may be unaware of the availability of services. These students are more likely to seek help in crisis situations rather than as a preventative measure, which can contribute to access difficulties like long wait times, and counsellors who have little experience with counselling international students with these common stresses. This may also account for why even though challenges related to cognitive dysfunction or diagnosed mental illnesses are rarely the focus of research, the literature refers to these students as being in dire need of mental health support.

What the research fails to present is the inherent strength and resilience of this population. For example, students often report not accessing services because they prefer to discuss their challenges with friends and family. While this help seeking behavior may stem from a culturally constructed understanding of problem solving that stigmatizes public discussions of personal challenges, it may also highlight the students' independence and desire for strong connections with their peers rather than with professionals.

The literature also focuses heavily on the cultural competence needed to work with Asian students but largely ignores other populations. Hwang et al., (2014) reported that 19% of their international student participants were White and that working with these students could require different kinds of multicultural competence that haven't yet been explored (p. 351).

This finding highlighted the need for future investigations into the challenges of culturally diverse international student populations.

It is likely that many of the support programs that already exist on post-secondary campuses would effectively buffer students' mental health challenges if they were to incorporate more culturally competent education about normal student stresses. Peer organized outreach campaigns have the potential to normalize students' experiences with depression and anxiety by framing help seeking as an act that can empower the student and positively affect all aspects of their post-secondary experience. Training upper year international student mentors about the reality of Western health care and the basics of making referrals to counselling services, not only creates an atmosphere of support for incoming students but also encourages them to consider mental health from outside of their own culturally specific experience.

Post-secondary student services can best support incoming international students by incorporating mental health language into conversations throughout students' time abroad. It is suggested that counselling departments actively work with student service offices, especially international student support offices, to provide resources and education, offer informal advice during support events, and market existing counselling groups that target international students. Since international student support offices are already providing the majority of support for this population, it is crucial that staff be trained in cultural competency around mental health conversations.

Knowing that students look first to information found on departmental websites or social media platforms can help improve accessibility to services. By simply creating a 'frequently asked questions' page highlighting typical international student challenges, students will be exposed to mental health language and understand that seeking help is nothing to be ashamed of. This technology can also be used to educate students who feel they are not in need of mental health support. Social media platforms are a direct and anonymous way for departments to disseminate knowledge and resources that can assist students in their self-care.

The inclusion of mental health terminology and discourse in virtual interactions with students can be an effective way for staff and advisors to begin having in person and non-threatening conversations about mental health.

It is also important that counselling centers and support offices recognize the different challenges undergraduate and graduate students face. While graduate students do not present needs significantly different from those of their domestic peers, they are more likely to struggle with issues surrounding language, their personal relationships, and interactions with their supervisors (Hyun et al., 2007). Educational programs targeting cross cultural communication and relationship building may inadvertently buffer against mental health challenges in graduate student populations.

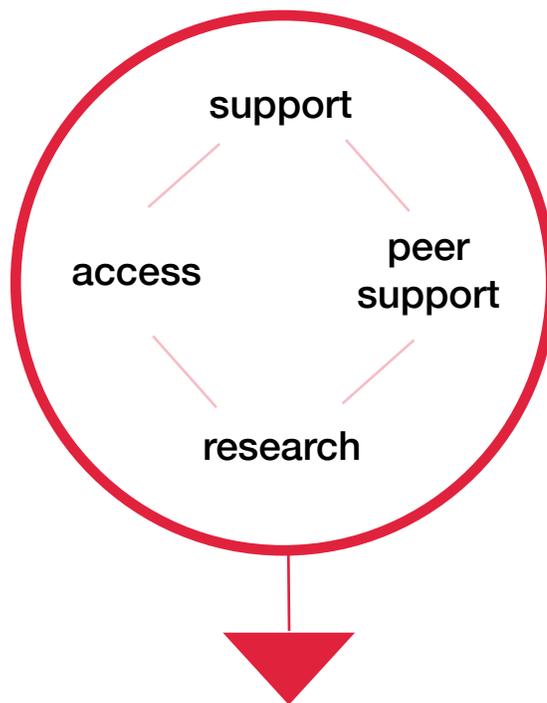
The literature provides a range of research that all highlight this population’s vulnerability to mental health challenges and offers professionals best practices based on lessons learned. International student support offices and counselling centers should consider the benefits of collecting up to date information about their specific student populations, as not all will present with the same needs for support defined by the literature. Campus wide training on cultural competency surrounding mental health conversations as well as introducing more informal, open attendance, partially structured, “discussion groups” have the potential to improve access for international students. A lack of available interpreters at campus counselling centers may also be a factor that influences help seeking behavior (Sheu & Fukuyama, 2007). Post-secondary institutions could hire more bilingual counsellors in order to increase access for students struggling with language and increase the benefits of therapy (Hwang et al., 2014). While addressed, issues surrounding confidentiality, informed consent, and student reactions to other standard western counselling procedures, need to be examined in future literature. These processes may be overlooked as a major reason for why international students are more likely to terminate their counselling after their intake session.

International students must be introduced to western understandings of mental health to ensure that they feel empowered rather than ashamed to seek help before they are in crisis. Counselling departments and international student support offices can work together to actively engage students in targeted,

but also campus-wide, discussions of mental health care in North America. For international students, who often lack satisfying relationships with domestic students, equal treatment and inclusion in the campus community will increase retention and the students’ overall post-secondary experiences.

By slightly adjusting the counselling model and outreach activities, it is possible to support diverse groups of international students already using existing resources. Ideally, international students who face mental health challenges can access support services through international offices, peer mentors, and the counselling center, without feeling stigmatized or weakened by the experience. With the proper support and information, students can recognize that their difficulties are part of a holistic journey, one that is defined by their abilities to overcome and thrive.

## IMPROVE...



## How?

Adjust Counselling Model  
and Outreach Activities

## SUGGESTED READINGS

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### **Multicultural Mental Health Resource Centre**

<http://www.multiculturalmentalhealth.ca/training/cultural-competence/cultural-competence-tools-and-guidelines/>

### **Counseling the Culturally Diverse**

Sue, D. W., & Sue, D. (2012).  
Counseling the Culturally Diverse :  
Theory and Practice (6th ed.).  
Hoboken: Wiley.

## RESOURCE KITS

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### **“Enhancing Cultural Competency Resource Kit”**

[http://www.multiculturalmentalhealth.ca/wp-content/uploads/2013/10/Enhancing\\_Cultural\\_Competency\\_Resource\\_Kit1.pdf](http://www.multiculturalmentalhealth.ca/wp-content/uploads/2013/10/Enhancing_Cultural_Competency_Resource_Kit1.pdf)

### **University of Washington Bothell**

[http://www.bothell.washington.edu/Global\\_Initiatives/Resources/Intercultural\\_Competence\\_Toolkit](http://www.bothell.washington.edu/Global_Initiatives/Resources/Intercultural_Competence_Toolkit)

### **Alberta Health Services**

[https://frcr.albertahealthservices.ca/pdfs/Enhancing\\_Cultural\\_Competency\\_Resource\\_Kit.pdf](https://frcr.albertahealthservices.ca/pdfs/Enhancing_Cultural_Competency_Resource_Kit.pdf)

### **CACUSS**

[http://www.cacuss.ca/\\_Library/documents/PSSMH\\_GuideToSystemicApproach\\_CACUSS-CMHA\\_2013.pdf](http://www.cacuss.ca/_Library/documents/PSSMH_GuideToSystemicApproach_CACUSS-CMHA_2013.pdf)

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