

Linnæus University

Sweden

Master of Science in Clinical Psychology

Saying Hejsan or Suffering in Silence?

What experiences do International Students have of mental health issues while studying in Sweden?



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Term: VT18

Subject: Clinical Psychology

Level: Masters Course code: 5PS44E

Abstract

The purpose of this study was to examine international students' experiences of mental health issues during their studies in Sweden. These experiences are seldom represented in academic literature, and thus this paper aims to recount international students' experiences of mental health issues, the methods in which they handle those issues and the role that Swedish culture, people and institutions have played in those experiences. Data was collected through semi-structured interviews with international students currently enrolled at the Linnaeus University in Växjö, Sweden – and subsequently analyzed through inductive thematic analysis. The results were summarized in four main themes; Acculturation, Mental Health, Under-utilization of Healthcare Facilities and Loneliness. The study concludes that international students may suffer from mental health issues that go undetected by university officials and mental health resources, and that universities may benefit from investing in programs to identify and offer support towards students in general, and international students in particular.

Keywords: International Students, Mental Health, Acculturation, Sweden, Psychology, Adaption, Freemover, Integration.

Abstract

Syftet med denna studie var att undersöka internationella studenters erfarenheter av mental ohälse under sin studievistelse i Sverige. Denna grupps erfarenheter blir sällan belysta i akademiska kontexter, och denna studie avsåg att skildra dels internationella studenters upplevelser av mental ohälsa, det sätt denna grupp hanterar dessa upplevelser på, samt vilken roll den Svenska kontexten, kulturen, folket och samhället spelar i dessa upplevelser. Data samlades in via semi-strukturerade intervjuer med internationella studenter vilka då vad studerande vid Linnéuniversitetet i Växjö, Sverige. Dessa data analyserades sedan ur en induktiv, tematisk analys. Resultaten representerades i fyra temata; Ackulturation, Mental Hälsa, Underutnyttjande av Vårdinstitutioner, och Ensamhet. Studien når slutsatsen att internationella studenter kan lida av mental ohälsa vilken gå förbisedd av universitetsanställd personal och personal anställd för att arbeta med mental ohälsa bland studenter. Universitet skulle potentiellt kunna främjas av investeringar i program för att identifiera och erbjuda stöd gentemot både inhemska och internationella studenter.

Nyckelord: Internationella Studenter, Mental Ohälsa, Ackulturation, Sverige, Psykologi, Adaption, Freemover, Integration.

Acknowledgments

Thank you to Siegbert Warkentin, Karin Siöö, Leonié Dapi Nfeza and Anette Hagner for your support and contributions towards making this thesis a reality. Thank you also to the seven individuals who volunteered for the interview. I hope to do your stories justice.

Introduction

The phenomena of students leaving their home countries to study abroad has increased since the conclusion of World War II, and continued globalization appears to accelerate this trend as access to new venues of education become increasingly available (Ozer, 2015; Smith & Khawaja, 2011). The ability to travel and move freely between cultures and nations has increased cooperation and international commerce between cultures. The increase of international students enrolling at universities in developed countries is considered necessary for heightened cultural awareness and appreciation, not to mention an increase of intellectual capital, which will benefit the workforce of the host country (Smith & Khawaja, 2011). Although international students are associated with heightened creativity and innovation on the global market, they are simultaneously associated with political, cultural and social challenges regarding adaption (Berry, 2005; Ozer, 2015; Smith & Khawaja, 2011) and acculturation (Berry, 2005; Ozer, 2015; Sam & Eide, 1991).

These challenges may include health issues, discrimination, socioeconomic challenges, and problems arising through conflicts of cultural values and traditions (Sam & Eide, 1991). While mental health issues among people attempting to adapt to new cultures is well documented, most available research has focused on the challenges posed by refugees or international immigrants, and not on international students (Mori, 2000; Ozer, 2015). Though Scandinavian contributions to the field of mental health among international students have been conducted in Denmark (Ozer, 2015) and Norway (Sam & Eide, 1991; Sam & Berry, 2010), this paper aims to explore the mental health experiences of international students at the Linnaeus University in Växjö, Sweden, with the goal of understanding how the Swedish context and academia in particular may interact with the the mental well-being of international students.

Background

The International Student

In psychological framework theory of acculturation, coined by Sam and Berry in 2006, an international student is considered a sojourner. The international student is thus understood as an individual who has left his or her country of residence to conduct studies in another country, often with the intention of one day returning home (Mori, 2000; Ozer, 2015; Sam & Berry, 2010). One distinction among international students are those of exchange

students and so called freemovers. Exchange students are students enrolled at a university level education in their country of residence, who may elect to spend one or more semesters abroad. A freemover is a student who has moved to another nation for a prolonged period of time in order to conduct his or her studies there. A freemover may return home to their country of origin after their studies have concluded, or they may plan to stay in their adopted country (Mori, 2000; Rodriguez, 2012).

Though a diverse and heterogeneous group, being by definition students from any foreign culture or country, international students nevertheless possess certain characteristics and qualities that set them apart from immigrants, refugees or ethnic minorities. Chief among these is that most international students have relocated to a foreign country to achieve a set goal within their education, after which they plan to return home to their country of origin. These individuals seldom begin academic careers abroad, and already possess post-primary school levels of education upon departure (Mori, 2000).

Acculturation & Adaption

Acculturation is a term for the process of psychological, social and cultural transformation and change that occurs when two or more different cultures or subcultures meet (Berry, 2005; Ozer, 2015; Sam & Berry, 2010). The process of acculturation is considered to be dynamic, and to occur within individuals, groups and cultures as a whole. When referring to an individual's ability to undergo the process of acculturation, the term *Adaption* is used to denote that individuals' socio-cultural and psychological achievements, progress, health, and ability to meet challenges involved in this process. The mental strain these challenges may cause upon an individual is collectively referred to as *acculturation stress* (Berry, 2005; Mori, 2000; Ozer, 2015; Sam & Berry, 2010). Adaption is thus not necessarily understood as a part of the acculturation process, but rather a consequence of it; the end result of an individual having weathered acculturation stress and managed to integrate and establish themselves in a new culture (Sam & Berry, 2010).

Social Support

The process of acculturation, and the psychological transition that occurs at the intersection of the host culture and the domestic culture, can be a stressful and challenging experience for international students, who often find themselves isolated from friends and family in a foreign culture, and sometimes unable to speak the language of the natives residing in their new culture (Ozer, 2015; Sam & Berry, 2010; Sam & Eide, 1991). The social

support networks they do maintain in the host culture often consist of other international students with whom they have a shared cultural or linguistic origin, and the function and quality of those networks may be distinct from that of relationships formed within their domestic cultures (Ozer, 2015; Mori, 2000). Often, such social support networks are relationships formed by necessity and chance, as the people involved in them may socialize strictly due to being able to speak the same language, and not necessarily due to common goals or shared interests, and as a result those relationships can be experienced as artificial or feel forced (Ozer, 2015; Mori, 2000). Such relationships can become strained due to political, religious or cultural differences or developments back in the home culture (Arthur, 1991; Mori, 2000)

Overall, international students report significantly lower access to social support networks than do domestic students, which may exacerbate experiences of social isolation, loneliness and anxiety (Ozer, 2015). The inability to form meaningful relationships may cause difficulties in establishing a foundation for a social support network, particularly the inability to form social relationships with natives of the host culture, which in turn precedes difficulties with psychological adaption (Mori, 2000; Smith & Khawaja, 2011).

Unique Challenges Facing International Students

Be they domestic or international, all university students face the challenge of adapting to a new social environment upon being admitted into institutions of higher learning (Mori, 2000). Nevertheless, while international students share many of these experiences with domestic students, they simultaneously face challenges that are unique to them, which may thus originate stressors unique to them. Upon arriving into a foreign culture, international students are faced with new values, beliefs, traditions, laws and norms which they must learn and adapt to, all the while still taking on the challenges that domestic students face, including establishing new social relationships, studying, and exploring the academic culture (Mori, 2000; Ozer, 2015).

The inability to speak the language of the host culture is one of the most significant issues facing international students, and the inability to adequately communicate in English is a common issue for many international students (Mori, 2000; Ozer, 2015; Smith & Khawaja, 2011). The national agency of education in Sweden postulates that multilingualism is a vital tool for communicating with and understanding the world at large, and in Sweden, education in the English language is obligatory from grammar school until graduation of primary school (Skolverket, 2018). Many countries do not offer education in English as a default in their

curriculum, and indeed, some students take up the language for the first time in preparation for studies abroad (Mori, 2000; Ozer, 2015; Smith & Khawaja, 2011). The inability to properly understand or make oneself understood in an academic setting diminishes the quality of education for the international student, and may also make it difficult for him or her to navigate the social aspects of the host culture (Mori, 2000; Smith & Khawaja, 2011).

Access to, and Under-utilization of Healthcare Services

Studies conducted in the United States of America, Denmark, Norway and Australia conclude that international students are less likely to seek healthcare than domestic students in those countries – and that they are more likely to seek out somatic healthcare than psychological healthcare for psychological suffering (Mori, 2000; Ozer, 2015; Sam & Eide, 1991; Smith & Khawaja, 2011). Furthermore, what psychological healthcare international students do undertake – such as psychotherapy - they tend to terminate prematurely when compared to domestic students (Mori, 2000). Often, under-utilization of mental health services in particular may stem from cultural values of mental health and psychological functioning. Mental health issues like depression and anxiety may be viewed upon as personal inadequacies or failures in the home culture, and may be a source of shame and stigmatization for the international student or his or her family, and the international student may thus be unwilling to acknowledge or seek treatment for his or her issues – in addition to being unwilling to follow through on such treatment once initiated (Flaskerud, 1986; Mori, 2000). Denial of mental health issues could be exacerbated by pressure from family members back in the home culture, as mental health issues in those cultures could be considered consequences of bad breeding or inadequacies in parenting (Flaskerud, 1986).

The negative experiences international students live through can manifest as psychological and psychosomatic symptoms, including loneliness, fatigue, feelings of sadness, rumination, anxiety, depression and paranoia (Sam & Eide, 1991; Smith & Khawaja, 2011), as well as an increased susceptibility to somatic illnesses and diseases, such as increased blood pressure, physical tension, chronic pain, insomnia, decreased appetite, gastrointestinal issues, ulcers and increased levels of stress (Mori, 2000). In fact, the term "Foreign Student Syndrome" was coined by Ward in 1967 to describe this phenomena, and emphasizes a trend among international students, particularly those of Oriental descent, somatizing their psychological suffering and acknowledging it only through somatic illnesses and difficulties (Allen, 1987; Flaskerud, 1986; Mori, 2000; Sam & Eide, 1991; Smith & Khawaja, 2011).

Because international students sometimes do not distinguish between somatic and psychological distress, they may consider symptoms such as stress, cognitive fatigue, insomnia and anxiety as indication of somatic illness. While these issues, particularly those of anxiety and depression, are challenges domestic students often face as well – international students are more prone to expect a somatic solution or pharmacotherapy to cure these symptoms, and may be frustrated with healthcare systems that insist upon psychotherapeutic care (Flaskerud, 1986; Mori, 2000). Additionally, international students' tendencies to somaticize their symptoms sometimes causes healthcare professionals to misdiagnose them, resulting in international students not receiving the therapies they need, or receiving them later than would domestic students (Flaskerud, 1986; Mori, 2000; Ozer, 2015).

Another reason for under-utilization of health care facilities among international students is the lack of information of such facilities even existing in the first place, as well as a general conception of those facilities being the exclusive domain of domestic students (Mori, 2000). International students may be misinformed about the selection of treatments offered, the cost of such treatments – and in the case of psychological treatment, be suspicious or distrustful of the mental healthcare professional, particularly in the context of interracial or cross-cultural therapeutic relationships between the mental healthcare professional and the international student (Flaskerud, 1987; Mori, 2000, Smith & Khawaja, 2011). An oft recurring reason for prematurely terminating a therapeutic contact is the international student reporting that the counselor in question did not possess adequate cultural knowledge regarding norms, values, and gender roles among others (Mori, 2000; Smith & Khawaja, 2011).

Cultural Expectations

A significant contributor to acculturation stress comes from the mismatch of the international students' expectations of their studies abroad, and the subsequent reality of the social, academic, psychological and cultural challenges that await them (Smith & Khawaja, 2011). Many students expect to perform at a similar or greater level than what they've done previously – and may find that linguistic or cultural differences in academia result in them performing below their own expectations (Mori, 2000; Sibley, Hamilton & Chugh, 2015; Smith & Khawaja, 2011). Performing at a lower level than expected may impact upon the international student's self-esteem, which combined with acculturation stress might cause stress and anxiety regarding performance, often with very real and significant economic and

cultural consequences regarding funding, family expectations, mental health and self-worth (Berry, 2005; Mori, 2000; Sibley, Hamilton & Chugh, 2015; Smith & Khawaja, 2011).

At times, life in certain western countries might be idealized by the international student, who then arrives in the host culture with unrealistic expectations of what life is going to be like. As these expectations meet reality, international students with unrealistic expectations may be confronted with feelings of loss, resentment, disappointment and sadness (Mori, 2000) as well as the risk of not living up to expectations they set for themselves (Mori, 2000; Smith & Khawaja, 2011). Such feelings of loss sometimes develop into a sense of inferiority (Mori, 2000).

Western and oriental cultures tend to differ in emphasis of the meaning and longevity of social relationships. Western cultures, being highly individualistic, tend to consider friendships much less permanent than do many eastern cultures (Mori, 2000; Smith & Khawaja, 2011). Western language and phrasing, often spoken by the domestic, western student by way of norm, can by the international student often be interpreted as genuine social or romantic interest. Phrases such as "I'll call you", or "We should hang out sometime" are often interpreted literally, and may result in disappointment should the invitation not come to fruition (Mori, 2000). As these experiences accumulate, particularly whilst the international student simultaneously faces other cultural stressors by means of ethnic or racial discrimination, academic and social failures, or economic hardships, the international student may become discouraged from attempting to seek further contact with other people (domestic students or internationals from other cultures) – electing instead to socialize only with students from their own cultural background, or isolate themselves wholly from other individuals (Mori, 2000; Smith & Khawaja, 2011). This social isolation may then further aggravate the acculturation process, making adaption more difficult (Berry, 2005; Mori, 2000; Ozer, 2015; Smith & Khawaja, 2011).

Purpose

This paper aims to provide a qualitative rendition of international students' experiences of mental health issues whilst attending educational programs or courses at the Linnaeus University in Växjö, Sweden. The paper aims to explore these experiences, the ways in which these issues have been exacerbated or alleviated by the Swedish cultural, social and academic context, and the means by which the international students themselves believe they have been helped, or could have been helped, by the host university and surrounding facilities.

Research questions: What experiences do international students have of mental health issues while studying in Sweden? What impact do they feel that the Swedish context has had on their mental well-being?

Pre-understanding

I have previously involved myself with social and educational programs aimed in part or in whole towards international students at the Linnaeus University of Växjö, Sweden, in which both myself and the informants interviewed for the purpose of this thesis are currently or have previously conducted our studies. As a result, I possess knowledge of the various institutions that exist within the university's perimeter, which interact with or are directly responsible for various functions regarding international student's issues. I am not involved with any such institution at the time of writing this thesis. I am neither a representative of, nor affiliated with any such institution, fraternity or group.

Method

As the paper aims to describe experiences and feelings, a qualitative method of gathering and interpreting data seemed the most appropriate. A qualitative paper is often understood by a holistic approach, where the experiences of the informants set the tone and narrative of the data, rather than the form of desired data setting the parameters for what the informant is allowed to share (Langemar, 2008). As the literature surrounding the mental health of international students in a Swedish-Scandinavian context is scarce to begin with, much can be gained by exploring the experiences of the informants with an inductive approach. To present the emerging themes as they were described by the informants, a phenomenological approach seemed the most appropriate. From this perspective, there is no assumption of any disconnect between an informant's experiences and an outside, objective reality to which these experiences are to be compared. The informant describes their reality, and the author of this thesis aims to fairly represent themes and patterns that emerge from these realities.

To this end, an inductive, thematic analysis has been elected as the preferable design for this thesis.

Procedure

Before beginning to gather background data, the author of this thesis attended interviews with student co-coordinators working with international students at the Linnaeus Student Union in Växjö, regarding what information had surfaced to the knowledge of university and union officials in regards to international students' mental health. The author followed up this meeting with interviewing a nurse through the county healthcare telephone service, 1177, to understand what differences may exist, and which difficulties may arise from international students seeking healthcare, compared to domestic students. The author of this thesis also conducted a confidential and informal interview with a former member of the local Erasmus Student Network organization, in order to familiarize himself with the issues international students face, and with which their student organization engage in at various levels. At the conclusion of these interviews, the author attempted to find willing informants to participate in the study. An ethical review application was filed.

Informants were recruited through an advertisement (see appendix A) posted on a social media often frequented by international students attending the Linnaeus University in Växjö. The same advertisement was also e-mailed to all international students currently attending a university-based acculturation-program, courtesy of the Linnaeus Student Union. The advertisement was published on February 22, 2018 - and the subsequent e-mail is to have been sent out at the same date by the student union. 7 individuals contacted the author via e-mail, and interviews were scheduled and performed between March 19, 2018 and April 5, 2018.

A semi-structured interview was conducted at March 19 with an interview guide (see appendix B) as a pilot study, and no changes were made to the interview guide for the remaining interviews. As there were no changes made, the pilot study itself was included in the final results. The interview guide explored the informant's emotional experiences during studies in Sweden, expectations the informants may have or have had upon Swedish society, culture and academia, and also what sort of support systems and facilities the international student may have sought out, and the subsequent experiences of these. Additionally, the interview guide explored what sort of, if any, support systems the informant would have liked to partake of, given the opportunity. All interviews were conducted in English, and informants were given opportunity to elaborate or clarify their position at any given time. All 7 interviews were recorded on cell-phone and video camera, for the purpose of transcription, and will be destroyed upon the conclusion of this study. Transcription began on March 20, 2018 and concluded on April 28, 2018. Sensitive information, such as addresses, phone

numbers, and names were omitted from the final transcription. The author of this thesis based the thematic analysis on the works of Langemar (2008) and Braun & Clarke (2006) allowing codes and themes to emerge by transcribing and re-visiting the data produced by the informants. Though several potential, latent patterns were acknowledged by the author of this thesis, focus has been laid solely on the semantic themes which emerged from the informants during the interviews. Furthermore, the emerging themes and sub-themes were compared to one another and were merged when necessary to avoid overlapping patterns and repetition.

Instruments

Two instruments were used to gather data. The first was the interview guide for the semi-structured interview (see appendix B), the second being Beck's Anxiety Inventory - BAI (see appendix C). The interview guide was constructed by the author of this thesis, with the aim to explore acculturation and adaption (Berry, 2005; Sam & Berry, 2010; Sam & Eide, 1991) as well as the experience of international students and mental health issues in a Scandinavian context (Ozer, 2015; Sam & Eide, 1991; Sam & Berry, 2010). Beck's Anxiety Inventory was used partially as an exclusion criterion for informants who might prove too distressed to participate in the interview, and to possibly capture the symptom of international students somatizing their psychological distress. While the anxiety inventory was applied as a method of exclusion from the study, it has not been used in the analysis of the collected data. The reasons for this were twofold; the sample was deemed too small to make any valid interpretations, and informants also reported mental health issues not measured by the anxiety inventory.

Informants

This study was based on 7 interviews with international students currently enrolled at the Linnaeus University in Växjö, all of whom had experience of mental health issues during their studies in Sweden. 5 informants were female and 2 were male. This study includes informants from Germany, Iran, Iraq, Italy, Japan, Syria, and the United States of America. The median age of all informants was 23, and the mean age of all informants was 24.1.

The Interview

The interviews were all conducted at the Linnaeus University in Växjö, in rooms provided by the Psychotherapy division at the department of Psychology and Social Sciences. All interviews were conducted one on one, and informants were given written consent forms

(see appendix D), as well as oral instructions and information regarding the interview and thesis. Informants were instructed as to their rights and offered to withdraw from the interview at any given moment, without the need for explanation. Informants were also given further contact information to the author of this thesis and his supervisor, should the informant have questions, concerns or a desire to be excluded from the thesis post-interview.

Results

Four themes emerged during the thematic analysis: Acculturation, Mental health, Expectations and Loneliness. Additionally, eleven sub-themes were identified: Independence, Adaption, Coping Strategies, Under-utilization of healthcare facilities, Confusion and lack of knowledge regarding healthcare institutions, Previous experiences with healthcare systems, Expectations on academics, Equality, Employment, Expectations of Swedish culture and the Sociability of Swedish natives.

Theme: Acculturation

Sub-themes to Acculturation include Independence and Adaption. Informants reflected upon their integration into Swedish society, not only as foreign born humans but also as students in a student-specific context. For several informants, coming to Sweden to study signified not only the first and only time they left their country of residence, but also the first time they moved away from their parents and family to establish themselves as independent and self-sufficient individuals with their own housing, employment and social life alongside their studies.

Sub-theme: Independence

Everything is different and maybe a little bit different. Now that I have to cook myself, I have to go shopping. And I have to clean my room. Everything is difficult, but I like it.

Some informants established themselves in Sweden effortlessly, whereas others struggled with communication, finance and predatory landlords. Exchange students who enroll at the Linnaeus University begin correspondence with university based-institutions prior to arrival, and these institutions then arrange pick-ups, housing, information packages and lectures to prepare the exchange students for navigating and surviving in Swedish society. According to freemover informants, no such programs target freemovers specifically, and they often arrive without proper preparation to remain in Sweden for the duration of their studies. It is not

uncommon for freemovers to arrive in Sweden without having arranged accommodation beforehand. Several informants report difficulties with finding housing, and insufficient finances as their chief concerns for becoming and remaining independent.

It's really difficult to get a place to live at university or even closeby in the same city. If you're an exchange student from outside of Europe, the university provides you with an apartment. It is of course not always the nicest place or cleanest, sometimes far away and sometimes with shared kitchen like in Lyan, but at least you have a place to stay. And as a Swedish student, you know how the system works and how to register and you decide pretty early probably where you are going to study, and you register and you are prepared. I was not aware of that. [...] So I couldn't, I wasn't able to register, and so I couldn't find a house regularly. I had to just accept what's available, which was very little. It's a big issue for most international students, and for me as well.

Even when housing or accommodation is found, international students often feel forced to accept subpar living conditions, because the alternative is to return home to their country of origin, potentially wasting a lot of money, time and opportunities, as exemplified by the following quote;

The housing issue was really problematic in the beginning. I didn't have a place to stay when I came here, so last minute I fixed a room from this Swedish guy who... Like, it wasn't furnished at all, only a mattress on the floor, and it was like 4 000 a month. And he was sleeping in the living room so he could rent out both rooms. It was really weird, he never harmed me in any way, but it was really weird, he could just come into my room whenever he wanted in the middle of the night. I was really frightened, and the kitchen was so dirty, I could never cook there – like, expired groceries everywhere, far away from the university, so I hated being there. I stayed away as much as possible until I could move. Like, I was new in the country, you don't know anyone, you don't know the language, I was the only one from my university. So you adapt, but in the beginning, it was scary, and unsafe, and I couldn't sleep in the night in case he would come inside. I didn't know anyone.

Many international students consider the cost of living in Sweden to be high, sometimes significantly and unexpectedly higher than in their countries of origins. Several informants felt limited in what they could do, or where they could go in Sweden as a result, as exemplified by the following quote;

In Sweden you have another currency, and if you compare to euros, it's so much more expensive.

Alcohol, housing, groceries, cinema, museum, clubs. If you don't have CSN, if you have parents who don't work here – there's a financial gap.

Other informants reported taking on jobs or loans in order to fund their studies.

Author: You mentioned that at one point, you had four jobs at the same time. Could you tell me why?

Why did you have four jobs at the same time?

Informant: Money in a sense, to be independent I guess. One of them was not being paid, since it was a start-up. It was more of a joined effort to maybe then get some money?

Certain countries also impose strict criteria that have to be met in order to qualify for government subsidized student loans. Even as an adult, the income of one or more parents may disqualify the student from being able to receive funding.

As a freemover, there's no CSN and no erasmus money or anything. When your parents earn more money, you don't get any support from the government in Germany. My parents' level of income is too high for German CSN to finance me, so I have to do that myself.

Some informants find the experience of going abroad to be proof of maturity and independence, reporting how life in Sweden has prompted them to take on new tasks and furthered personal development and growth.

Apart from thinking about visa and like that, I'm very happy here. I like it, I really like it. Because I do everything by myself. I never do these things back home, I always got help from my friends and my family. I do everything here. I do shopping, I do laundry, and that's why my mother say that I am like a Swedish or like a big girl or a very old, not old, mature woman. It helps me to improve my self-confidence, and I really seeing it in every day of my life. So every time I hear that, it helps me become more confidence and make my life happy for myself to enjoy.

Sub-theme: Adaption

So the other thing is feeling safe. I go outside whenever I want. And... Everything is safe, but in my home country, I couldn't go out, for example, at 9 PM or 10 PM, I couldn't feel safe. But here, I have been outside at 1 AM or 2 AM even, so its second thing, I can feel comfortable here.

Several informants, particularly women and international students from the Middle-East, expressed a desire to remain in Sweden post-graduation. These students were all looking for jobs, attended at least bi-weekly classes to learn Swedish, and valued spending time with Swedish natives as part of the process to become permanent citizens.

There appears to be some variation among informants in what eases the acculturation process. For some, it is the structure and stability offered by Swedish institutions that makes them feel integrated and part of Swedish society;

I started feeling like that after the first... Actually, when I started studying. There's the life events and all, but I was finally part of a structural thing. Not just a course, I was actually a part of a program. I got an ID, a personal number. It was more related I think to starting to talk to people my age. It was harder to reach out to the people at the university, there were offices and all. I never used it, personally, I waited until I met people who knew about it who I can relate to.

Other informants valued acknowledgment from Swedish natives as a sign of adaption, as exemplified by the following quote;

Informant: My Swedish friendships feel more... Genuine? Cause, we're all internationals, we're all outgoing, we're all kind and helpful to each other, so we're all kind of friends, but you know, we're all leaving, so we're not... That close. But the Swedish people I've actually become friends with, we're like, actual friends.

Author: Aren't you leaving as well? Eventually?

Informant: Hmm. Yeah. But like, it actually takes more effort to become friends with Swedish people, in my experience? So we, like, talk more and hanging out with them is more, like, on purpose? Whereas hanging out with internationals is more coincident, because like, we're all hungry and here at the same time and crammed into the same space, let's eat dinner together! [...] I want to make Swedish friends because I am in Sweden, and I feel like it makes it better to, like, learn the culture and, like, navigate life here. Which is, like... Worth it? Haha.

Theme: Mental Health

Sub-themes of Mental Health include Coping strategies, Under-utilization of healthcare facilities, Confusion and lack of knowledge regarding healthcare institutions as well as Previous experiences with healthcare systems. Mental Health was the focus of the interview,

and previous experience of having had mental health issues whilst studying in Sweden was an inclusion criterion to participate. Several informants had current or previous experiences with anxiety, depression, stress, insomnia, night terrors or eating disorders. Some informants had no specific diagnosis, but stated that they had experienced psychological discomfort to such a degree that they wanted to be included in the study.

Sub-theme: Coping Strategies

Sometimes I just sleep a lot. Sometimes I just watch movies to take my mind off of it. And I, uhm. Sometimes talk with my sister. Weed will help. Some days I just hope that, I don't know, maybe tomorrow will be better.

When asked how they handle negative emotions, moods or experiences, informants give varied answers. Some informants retreat from the threat, hoping it'll go away;

Retreat into, escape into my imagination. Easier that way. Like, escape from reality. Eating foods, watching anime. Or, like, youtube. Not consider that anymore. So I eat more. I look at other people, and I don't see myself.

I don't know. I just... Sometimes, actually, I try not handle it, but sometimes I try forget and just enjoy my day, but after that day or after one week, I again remember them and I start thinking about them.

Others avoid the experience by way of self-medication;

Back home I usually just smoked weed, but you can't really get that stuff here, so I smoke hash. [...] It started of as recreational, and it's mostly recreational, but sometimes like... Something that like makes me depressed, is being by myself. [...] I have a good time when I'm high and by myself. I just like eat food and do art, watch Netflix or whatever.

When possible, several informants seek out social support;

During the week, I have a good feeling! Because I meet a lot of new people. At the university, gym also library, I am not alone. When I am feeling depressed I can come out and uhm talk to other friends and talk to other people. During the week I am okay. But. Actually, if I am telling the truth, last weekend I was really depressed. I can't believe. I was thinking about suicide. No, only one time or two time but I was really depressed on weekend.

Even so, talking to friends didn't always alleviate feelings of stress or anxiety;

I tried talking to people about it. But it was such a constant thing, people who asked me just expected me to say that I was super stressed. Some friends tried to calm me down a bit, but... And... I don't know, yeah, they just tried to help me settle down. It didn't really get better. [...] I felt that I had this huge pile of work that just won't end, and sometimes I just, when I have too much to do, I just sit there, shocked, and looking at it, not doing anything. Uhm. Yeah. So, it was like, not a good situation.

Often lacking such systems for social support in Sweden, international students contact family or friends back in the home culture;

Yeah. It depends on my feelings. Melancholy make me call, not so much otherwise. It helps a little.

Talk to mom or grandmother.

Some informants find that having a creative outlet is helpful;

Hahahaha. I knit hats. I also found out that I stress-knit as a way of procrastination. [...] Usually at night to wind down, I'll start watching Netflix in front of the bed. During finals week specifically, if I'm like watching Netflix, I'm like oh my god this is terrible I should be studying why am I wasting my time, and I get really worked up about it. So I'll knit while watching Netflix to make myself feel like I'm being productive or doing something. So I'm like, "well, I'm not studying, but at least I made a hat!" And one of my roommates pointed that out to me the other year, when I knitted like 4 hats in 3 days during finals week, usually a hat takes me like a month. So... Yeah. Haha.

Sub-theme: Under-utilization of Healthcare Facilities

During my introduction days when I first arrived there was this woman from the student welfare office who was like "yeah, whenever you have a problem, you can always come here" so in general I was aware that it exists. But still, we have this kind of office in my German university as well, but nobody ever goes there – and when you go, they can't really help you anyway? So it took me some time to realize that they actually mean it that way. Because in Germany, they say they want to help – but they don't really want to, they don't mean it.

Various facilities for psychological and somatic healthcare exist in Sweden, and are available for use by both natives and internationals. Some such institutions are governed by the county council, and others in part or in whole by the university. Yet several informants reported not

having sought out such facilities despite acknowledging that they would have liked to do so. The reasons for this are varied; the above quote exemplifies a general distrust towards such facilities, based on cultural expectations and experiences as to the purpose of such facilities, or the inclination and veracity of the personnel employed there. The following quote encapsulates a general distrust and insecurity towards the type and quality of help that the informant expected to receive.

And also the student counselors in the IO. [...] Recently when I had a need, I looked into the counselors, and they told me they didn't offer any emergency talks. I also learned that you're not supposed to contact them directly, it says you should book through an e-mail to the info dot. I was going to e-mail, but then I decided not to – even though I really needed to, because I was afraid – like, I didn't know who was going to read that. I also felt that I didn't want to demand anything, but I wanted to be able to sum up what I was going through, and that if they could offer something asap, then that'd be great. But in the end I just, deleted my e-mail, because I was afraid, haha, to e-mail them. Plus I was reading we only offer up to 5 sessions? So it doesn't sound like a proper support system, it was only for, like, if you were nervous in case of an exam kind of thing? Not to diminish other people's difficulties, but it just, it was very specific, very mild kind of situational help.

In addition to feeling that the kind of aid offered being mismatched towards the informants' specific issues and needs, students suffering from high internal pressure and stress found it difficult to make time to find information about navigating the healthcare systems, or to manage to fit various seminars and workshops on stress management into their already packed schedules.

I just feel like last semester, I don't know, they wouldn't have been able to help me. I was just so stressed out. Like, how would I have time to go there? Additionally, it was really just more like, I don't know, feeling bad about being overworked or stressed is different from feeling bad because something bad happened to you. Where you are, like, "I need to talk to someone now". Uhm, so, yeah, I dunno, but it's always also an obstacle, to, like, go there in my opinion. Even though I know they have seminars for stress and so. But I feel like, last semester, I was stressed – it was an internal issue, so I couldn't really go there and, yeah.

Some informants avoided contact with healthcare out of fear of economic reprisal;

My friend tell me I should go to the doctor. I have personal number, but I'm really afraid of cost. My friend stayed only three days in hospital, but he has no personal number, but after one month he got a

bill for thirty thousand kronor. So it made me sad and now I'm, I'm a little sc- afraid of getting high bill.

Whilst others abstained due to fear of social humiliation;

I maybe afraid of going to hospital. [...] Maybe it's, they. People stare. I don't have good English.
[...] The people in Sweden. Maybe they feel I am inferior. I don't have good English, and only little
Swedish.

Some internationals report hailing from cultures where healthcare is privatized, and impoverished citizens gain access to healthcare through charity healthcare facilities, so called "free clinics". When these internationals go abroad, the various insurance policies provided by their employment or universities may not be acknowledged by government subsidized healthcare systems, as is the case in Sweden, leading to high personal cost for international students seeking healthcare for anything but life threatening situations, as exemplified by the following two quotes;

My anxiety is pretty constant, heh. Like even when I, really when there's nothing really pressing going on and it's still there, and for the first month or so my depression was really bad. I tried to get help to get my meds re-evaluated, cause like even my anxiety attack medication wasn't working. Like, it didn't help, and, so I was trying to like reach out and find help, and, there is, uhm, like therapy sessions available here at school for free. But... As far as like getting my meds looked into because like I'm on medication and I want my meds to be re-evaluated, it's like impossible. Unless I want to pay absurd amounts of money.

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I've been trying to get into a clinic for several weeks now, and I literally just can't. Every time I call nobody answers. Like, the lines are so booked up for the day, that I can't even get on the phone with a person. So... Like, basically anything health related, mental health, physical health, like... Is a nightmare to deal with here, hahaha. And it's just like, really, stressful that, like... I might not be able to get any sort of the help I need, like, I would have to pay 500 crowns to get my own birth control shot here, or 800 crowns! 800 crowns! Back home it's free. Cause my insurance covers it. Back home, if you don't have insurance, even, for this kind of stuff you can just go to Planned Parenthood or some sort of clinic, and they'll help you out for free. But because everything's subsidized here, they don't have any need for anything like that. So they don't exist.

Sub-theme: Confusion and Lack of Knowledge about Healthcare Institutions

Like, if they could point, like, had someone who could point out and say "Hey, if you're an international student, go here for any sort of healthcare needs, it'll cost, like, vaguely X amount of money", and like, if they could actually lay out what I need to do, because I have had to figure everything out on my own. Like if they could, if they could at least point me in the right direction, I figured, that'd be neat, haha.

Several informants expressed frustration, weariness or disappointment with what they perceived as a bureaucratic, potentially expensive, and generally difficult environment in regards to healthcare institutions. A lack of understanding regarding healthcare in Sweden prevented international students from seeking medical or psychological aid when they required it. Though many internationals are able to navigate Swedish society by having a rudimentary understanding of the English language, Healthcare institutions appeared to form a linguistic barrier among the informants in this study;

We went there and we discovered that you can't just walk in and book an appointment, at least not if you don't have a personal number, which I didn't at the time. Then I had troubles, I would call and they would be mostly in Swedish. You could choose to have it in English, but then the first part would be English, and then the second part would be Swedish again — and I wouldn't understand what to do! And so I remember calling and hanging up so many times at first.

When asked about what knowledge they would like to have in regards to healthcare, informants unanimously reported that they wanted to know how much it'd cost them. Lack of information regarding the economic consequences of seeking healthcare had prevented several informants from seeking aid;

Actually, about that, how much we have to pay, for an example. How many days before we have to get appointment. Or if you want to have appointment you have to send an e-mail, or you have to go and talk face to face or, I don't have any information about that.

Some informants communicated that they didn't know where to go, or how to find out where to go. This is exemplified in the following two quotes;

Information is hard to come by in Sweden. I go, maybe, five times. I try, but it's hard. [...] learning where to go, who to see.

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I'd love to go, but I actually, I don't know how, I'm not familiar with the rule, but I heard that in Sweden, get appointment from doctor is a little difficult, I don't know, actually. My information is not enough. I don't know, even, in weekend they are open or not. No information, no.

Consequently, the inability to find proper healthcare severely diminished international students' ability to function on a social or academic level, and may directly or indirectly have contributed to worsening their experiences of both their studies, their social lives and their overall enjoyment of being in Sweden;

I just felt really shitty, like, I should be having the time of my life while I'm here, and like, enjoying every minute of it, but I just felt... Felt like shit, haha. Like, I... Didn't have any motivation to do things, I felt, uhm. Really alone. [...] And, especially when I tried to find help and I couldn't find it, and I realized that I couldn't get it. Was really... That was really difficult, and that was one of the things that would set off the anxiety attack for me, like, I was reaching out for help, and realizing that I can't get it. Uhm... I just felt, like, really alone and really helpless.

As part of their introduction, exchange students receive information on how to seek counsel from primary healthcare institutions, and phone numbers for emergency healthcare.

Nevertheless, several informants reported that they had no idea where to go or who to get in touch with regarding psychological healthcare, even in the case of an emergency;

I don't understand if there's any... 1177, psychological help system? Cause I... In the past, when I had like depressive symptoms and I really needed to get help. I don't want to say it was an emergency, but... Kinda? There was nothing, I think?

Sub-theme: Previous Experiences with Healthcare Systems

Maybe I'm just unlucky? The availability was easier, maybe cause I got informal contact with the psychologist? I just called to book her without going through a hundred people. But it was... I feel bad to say that it wasn't good service, but in my specific case, it wasn't.

Some international students had negative first impressions from making initial contact with Swedish healthcare, which then prevented them from seeking aid further down the road. Others had negative experiences of the kind of healthcare they receive;

And here I was disappointed with the type of... Help, that I was getting at ***. And at one I point I just felt lost, cause one time I already dropped that psychologist, and then I went back and I was referred to the same psychologist – and I thought I'd give it a try again, because I thought, maybe last time it was me that didn't work, and, I don't know, I just see that, I think that made it worse, and then I - I was just over it.

Some informants also took issue with the healthcare professionals themselves, reporting that they were inadequately equipped to handle the specific issues which the informants required treatment for;

So that's when I met the psychologist, and I think she... She didn't understand or she didn't specialize in how to treat that kind of thing. She give me suggestions like "just try to provoke your binging, and see what happens" which just to me seemed really weird. Like maybe she had a great plan, but to me... Under her attention, it got worse very fast, haha...

There were also experiences of the Swedish healthcare systems as disorganized in regards to both healthcare itself and the financing of it, with results being lost, or appointments not being made.

Then I had some problems with some blood tests I had, and then I never got the results, and then I didn't have to pay, but then I got fined for not paying, but they never received it, and that was a huge mess. I was supposed to be contacted by a certain clinic, and they never got back to me, and I got in touch every month and they told me that they were processing, but it was just an excuse, because then they call me finally from that place, months later, and said "we just got the letter today. We noticed how late it was, so we called you immediately", but they messed up that too. But they have a lot of patients, I guess, so it's not something to be mad about.

It is not always clear to international students whether their specific condition or illness, psychological or somatic, will be covered by their various insurances, or if the cost of treatment would fall on them personally.

Maybe insurance company will help you, maybe not. It's important, because some of my friends who don't have personal number, went to the hospital and just waste very much money. 30 000 kronor is very much money if they don't have income here.

Informants were double-billed, or received bills in spite of receiving instructions that they would not be billed.

I had the situation where once I went to the hospital, they told me I didn't have to pay because it was included in general services. Then half a year later, I got a letter with a high fee – and it was a second warning, telling me I had to pay!

Some international students were also disheartened by having to wait for prolonged periods of time in order to get help for issues that they experienced as rather pressing;

At one point I had to ask in one month in advance if that was possible, and they said unfortunately, no, I had to wait more than a month. Because I had to change my medications, so maybe this wasn't the stupidest thing, but he told me that maybe I should go home, to my Italian doctor, and handle it with them. Which made sense, but... If someone doesn't have anywhere else to go, that might be a problem.

Theme: Expectations

Informants reported what expectations they had upon a variety of subjects before they arrived in Sweden, and also how well these expectations matched their experiences upon arrival. Several patterns emerged from these stories, and the sub-themes that formed were Expectations upon Academics, Equality, Employment and Swedish Culture.

Sub-theme: Expectations on Academics

Hahaha, that was a mistake on my part. So much work just getting the assignments, getting them done, and you know expectations here are very different then they are back home.

Several informants were surprised with how the Swedish academic system functioned in comparison to the academic systems of their native cultures. Some academic cultures, for an example the north Americans, have parallel courses that run the length of a semester, with all courses being examined simultaneously towards the end of each semester, something colloquially referred to by students as "finals week". To international students from such academic cultures, the Swedish academic system with several exams spread across the semester, and with the chance of re-submissions and direct feedback from teachers, is alien and confounding, and places upon the international student new kinds of expectations as to how they are expected to perform, introducing new kinds of stress;

Like, we don't have resubmit- re submissions? Back home, whereas here, they're fairly regular. [...]

And the grading scale is very different, so. It's just, it's... It's very different and it's a lot to handle.

And, like, constant stress. I have this assignment, I need to get this project done, meet with this one, I haven't even started with this one, and all the stuff I need to do,

Additionally, international students from foreign academic cultures may not be accustomed to abstract instructions on exams, hailing instead from backgrounds where students are expected to memorize information and then recount it in order to receive a passing grade. To these international students, Swedish exams may be experienced as vague, obscure or unintuitive;

If you don't do well on something, then you just don't do well. [...] Also, things are really more clearly outlined, like expectations are very clear, like what to do and what not to do are, well, more clearly laid out for assignments in the US. Whereas here, like, I just feel like I get told to do something, and then just... Expected to magically know what I'm doing. [...] I don't know, I feel like the... Instructions here are a lot less, but with like, I don't know, like higher expectations.

This sometimes had the effect of the international student attempting to discern what the examiner was expecting from their students, with the international student then providing their own internal theory as to how the Swedish academic system functions. One such theory was that the student is expected to fail every exam the first time they take it, in order to learn from their mistakes and then pass the exam upon taking it the second or third time;

So it feels like here the first assignment is really just like, to clarify everything for the second attempts that you can actually get it right. Like in the US [...] it took a while sometimes, I'd be confused about things. I always knew how I was doing, the report layout was really simple [...] You didn't really have to talk about it as long as your *** worked and did whatever it was supposed to do, that's all it was. But here, like... I have to explain things, and it has to be in just the right format, you have to get screenshots of things working, and explain what the screenshots are.

Additionally, international students may have created expectations for themselves about what they are going to experience while abroad. Such expectations include social relationships, personal growth and development, academic success, romantic endeavors, traveling, and learning a new language. These students may also be surprised and ill-prepared at the

prospect of encountering hardships, academic failures, mental health issues, falling out with friends and course mates in addition to unexpected developments back in the home culture;

I had, like, so, like, really high expectations, like, staying abroad is going to be AMAZING, and I'm going to learn so much, and I have, definitely, it's been an amazing experience, just, I wasn't expecting... To have to deal with... Feeling that depressed. So soon, especially. And... I, like, really the finding out that help wasn't available when I needed it, was, was another, was a really big thing that... Made it worse. [...] Like, it just feels like there's a lot to deal with between being here and dealing with everything in this country but also having to deal with stuff halfway around the world.

Sub-theme: Equality

Here I can put on the clothes and dress as I like. I can wear a colourful dress. I can go out without a scarf, for an example. Very different with my country. I can go to the gym and I can meet both boy and girl. But in our country, we go to separated gym, or separated library or separated university. So, uhm, very different experience for me. I like this kind of freedom.

Female and middle-eastern informants report that they feel liberated by Swedish cultural expectations on gender roles and body types, compared to their native cultures. Some of these cultures put restrictions on the mobility and freedom of their citizens based on gender, class, and disabilities – with some informants reporting that they feel unsafe in their home cultures, but safe in Sweden;

I really liked to live in Europe. Because it's very different with my country. Especially in my country we have a lot of discrimination against woman. And, for example, in my country, I never, I can't go to a stadium. I can't watch movie, I can't drive a bicycle, I can't go to the facebook, I can't go to youtube. And something like that. I can't go to the, uh, actually, for example, nightclub or something like that is forbidden. Uhm, women we don't have freedom.

International students with disabilities may experience discrimination and threats in their native cultures, and are surprised and delighted with how Swedish institutions, be they universities or housing companies, adapt to fit the needs of students or tenants with various disabilities. Furthermore, international students may perceive such tolerance as a cultural aspect of Swedish society, attributing it to government or Swedish citizens;

I haven't had comfortable life in my home country. If you have different shape, you don't have good place. Nobody care about you. You won't have good job, and you won't have good life. And I know some people with disability who are living there, and one of them have left one months ago, only because she's disabled, and she couldn't have her life. So the reason I left was that I heard a lot about Sweden and the services and the respect the government have of people of different shape, I feel COMFORTABLE here, I feel SAFE here, nobody point at me, nobody laugh at me.

Sub-theme: Future Employment

If I can find another way to stay here [...] I always think about that that every night, and sometimes worry about them [...] I destroy my day by thinking about this kind of issue. So I get nervous, and sometimes my friends tell me, why am I thinking about them at the moment? You should think about your study and your grade and your exam, not next year, but I can't do that, because I like to think about them, and all of them make me nervous, it make me worried, and it destroy me, I think, because I worry, and I think. So I will forgot my study and I will be thinking and thinking and thinking. It destroys me, I think.

The uncertainty of future employment is a source of much stress and anxiety among informants, particularly those who express a desire to remain in Sweden after their studies have concluded. Informants from outside of Europe in particular spent a significant amount of their time applying for jobs, renewing or re-negotiating visas and attending Swedish evening courses in order to learn the language. The process of applying for a workers' visa or permanent citizenship in particular appears to be a long and uncertain process, which impacts international students experiences of studying in Sweden;

After you finish as an international student, you can apply to get 6 months extension visa while applying for job. If you can not, you have to go back. And whatever you have done here, I think, it's just... I don't know, spending time or wasting time. As far as I know, every student that comes from my country, they want to stay here, find a job or get a PhD. They just think about, what will happen to me? How can I change to another visa to stay here?

International students who are enrolled in programs where international students and domestic students intermingle, such as English-speaking master level programs, perceive a difference in employability between themselves and Swedish natives with similar credentials and education;

Well, I see now for the, uh, work – jobs and everything, there I see my Swedish friends get new jobs and interviews. But where for me or other people that are not Swedish, it's not that common for that to happen.

At the same time, several informants also report that such patterns may be more indicative of a small-town mentality than Swedish culture in general, and most informants feel that they are required to migrate away from Swedish university towns and establish themselves in larger cities in Sweden instead, explaining that they perceive Swedish cities like Malmö, Stockholm and Gothenburg to be more multicultural, and thus more tolerant towards hiring people with non-Swedish backgrounds;

In that sense I think it will be hard, but I am positive. I will move to Malmö, which is a more big and international town, so, I'm positive.

Sub-theme: Expectations of Swedish Culture

I only had good news about Sweden. It's an advanced country in technology. Everyone told me it's very cold, 6 months night, 6 months day. I research and I found, oh, it's a very little issue.

International students who decide to embark upon a semester (or more) abroad in Sweden often create a mental representation of what Sweden is like. They arrive with expectations and fantasies about Swedish culture, people, language and environment. Sometimes, these expectations are based on information gleamed from books, social media, television or stories from friends, families or course mates who have been to Sweden previously, or had encounters with Swedish natives whilst traveling in other countries. Sometimes, expectations are made to accentuate the perceived differences between Swedish culture and the international student's domestic culture;

I didn't have pictures in my mind about what it'd be like, but I had a lot of positive expectations. I thought there'd be a lot of respect as compared to my country, also to the environment, and be polite.

Informants also report that their lack of knowledge about the political and social clime of Sweden may contribute to their perception of how Swedish culture and society functions;

In that sense I think it's mostly how I imagined it. Looking at the people, from the outside, it all looks good to me. Too good, maybe, I don't know what's behind. Also here, I feel less connected to politics

and so on. So maybe that's a reason for why I think everything here is better than in my home country, cause I don't hear the things most of the time. I think it's much better to be here than to be home. I learned a lot of new things.

Theme: Loneliness

International students who relocate to a new country to conduct their studies often do so alone, and in the case of freemovers, without government-subsidised support packages, be they financial, social or otherwise. Students who are unwilling or unable to form social relationships with people in their adopted culture may often suffer from feelings of isolation and loneliness, as was the case with several informants in this study. In addition to a general sense of being alone, separated from others, or disconnected from peers in the adopted culture as well as from friends and family in their native culture, a sub-theme emerged regarding international students' perception on the Sociability of Swedish natives.

Several informants expressed implicit knowledge of feeling alone, and suffering as a result of perceived isolation and loneliness. Informants simultaneously report psychosomatic symptoms as being part of the same experience; with several informants reporting headaches, insomnia, night terrors, feeling of sadness and fatigue as interwoven in their experience of loneliness:

I can't explain, it's difficult. Actually, I like living and so in Sweden, but I don't know why, I feel alone, I feel depressed, uhm. Almost every night I go to the gym, I meet friends, but during the day, especially on weekends, I cry, I feel sad, I don't know why. Sometimes dizzy. Headache. Different experience.

Some international students experience a social connection to friends and peers while being in physical proximity to them; such as working together during courses, or attending events together. When separated, in evenings on during weekends, informants report feelings of loneliness that then develop into negative thought patterns and depressive moods;

Actually, I don't know why. Maybe because on the weekend I am alone, I can't meet friends or new people. On weekends, most of the students prefer to be with their family and I am alone. At the library I can't meet new friends, in the gym maybe only three people are doing exercise. On weekend, I feel alone. I think. And I have a bad feeling. Sadness.

Some international students experience difficulties with creating or maintaining social relationships with other people. Barriers include language, culture, gender, age and personality. Informants who reported feeling alone also reported involving themselves with drugs, alcohol, exercise or work in order to distract themselves from their loneliness;

And like, I'm an introvert, I usually don't mind being by myself, but sometimes, sitting there by myself not doing anything makes me feel depressed... So... If I'm high, then I can have a good time and like feel better about it, not like feel shitty for being alone. So... Yeah.

Sub-theme: Sociability of Swedish Natives

Overall they've all been nice, and helpful. It's very hard to make friends with Swedish people, though, because they all seem to be very introverted. So uhm, it, like, took a bit of effort to get them to, like, talk to me.

Informants unanimously report that they perceive Swedish natives as "cold", reserved, shy and/or introverted, yet attribute these characteristics to different aspects of how they perceive Swedish culture. Some informants, particularly those of European ancestry, report that Swedish introversion and coldness is actually a cultural expression of respect or politeness;

What others might interpret as being cold, I think is actually being polite. Uhm, so that's my main expectation. Then I learned also that they seemed to be a bit more relaxed, also in working, waiting in line, taking their time. That's my picture of Sweden.

Other informants, particularly males and those with middle-eastern ancestry, report experiencing coldness as discrimination or an unwillingness from Swedes to associate themselves with international students, or international students from the middle-east;

I think people in Sweden are a bit too cold. They don't prefer to share something with you and, maybe they don't want to extend hand maybe with you, I don't know, maybe they are shy maybe they are selfish, I don't know, but, I know that they are a bit of cold, very different with middle-east people.

Informants hailing from cultures where family, friends and groups are highly valued reported being surprised at what they perceived as Swedish natives' independence and unwillingness to ask for or extend help towards other people.

Sweden, it's like more, like the people are more independent, so, cooperate less with each other. That is different, so. So no asking for help. [...] Japan is different. [...] I thought like. We were like. Helping. Other people. Even in Japan we not much money. Someone help. Care about you. We help, even if we have not much money. In Sweden, you can not.

Informants who've managed to establish lasting and meaningful relationships with Swedish natives report that it requires considerably more effort on their part than did relationships with other international students. These informants simultaneously explain that they perceive social relationships with Swedes as more meaningful and genuine than relationships with other internationals. Some informants report that language was a significant barrier to socialising with Swedish natives whom, despite being fluent and comfortable with speaking English, became considerably more interested in socialising with informants who attempted to learn to speak Swedish;

Others told me Swedish people are very cold, they don't want to be your friends, they don't like people, they only want their own life. But I have Swedish friends, when I came here, I agree – they were very cold, but after one month, I found some Swedish friends, and I find that no, they are very friendly. But back home, they say they won't care about me, they don't want you. But I learned that you need to know good Swedish, so you can make good conversation and communication with them. If I talk to them in Swedish, they get very happy, and they encourage me. So it makes me good feeling, that I am successful in learning Swedish. I found them very friendly, and now I have a lot I think, 15-20 Swedish people, and they are like my family. I am very happy that I have them. They are very helpful, and very friendly.

Informants also reported feeling excluded from Swedish social settings by their inability to speak Swedish. This feeling of exclusion was exacerbated by the knowledge that Swedish natives were fluent in English, but made active choices to communicate only in Swedish;

At first, like, if I asked them a question, they'd turn to me, switch to English, answer me, and then switch back to Swedish to have a conversation, so I couldn't be part of any conversations. I told one of them that hey, it's hard to be part of the conversation, since I can't speak Swedish, and I think she said something to them, so now they all speak English. I think that's generally true for a lot of things, because I was talking to a friend, and he had the same issue. He's in a group project, and they all speak Swedish around him. Like, they all speak English, and he doesn't speak Swedish, but they still speak only Swedish around him.

Furthermore, informants experienced a need to be more extroverted if they wanted to socialise with Swedes – explaining that the international students may need Swedish relationships in order to adapt to Swedish culture and society, whereas Swedish natives had no such need to socialise with international students. In addition to this perceived imbalance, informants also interpreted Swedish natives to be uncomfortable with socialising with new people, and some informants felt that they were required to be increasingly extroverted in addition to being interesting enough for Swedish natives to overcome a cultural indifference or apprehension towards socialising with internationals;

Being here, I'm forced to be more extroverted if I want to make friends. Whereas Swedish people have no need to be extroverted, really. I force myself to be outgoing in order to make friends, whereas they don't really need to be friends with me. My kind of introversion is, I'm around a lot of people, I get exhausted, whereas Swedes, they really like their space. They'd prefer... NOT to talk to strangers, if they don't have to.

The perception of interaction with Swedish natives as more genuine and authentic was not limited to relationships with peers, but appeared to extend into communicating with Swedish natives in general;

It comes down to me with social interactions. I like it more here how it happens. It feels more respectful and thought through when you talk to someone. When you're talking, it's more genuine. It fits my character, more. That also applies to many recent situations, could be in a store, or contact with healthcare person, to person. It's hard to get there, haha, but... Yeah.

Discussion

The purpose of this thesis was to examine international student's experiences of having mental health issues whilst studying in Sweden, as well as how the Swedish setting impacted upon those experiences. Below, the results will be discussed through the four themes that emerged during the thematic analysis.

Acculturation

International students that participated in this study reported mixed experiences of coming to and establishing themselves in Sweden. Freemovers and those informants who were enrolled in programs spanning several semesters reported being satisfied with their

adaption process more frequently than did those exchange students who visited Sweden for only one or two semesters. A possible explanation for this might be that the learning and linguistic internalization of the Swedish language may be a slow process which long-term international students manage to undergo, whereas exchange students seldom stay in Sweden long enough to learn, practice and apply whatever Swedish skills they manage to pick up. As Mori (2000), Ozer (2015) and Smith and Khawaja (2011) explain, an ability for international students to understand and make themselves understood in communication with others is one of the most significant factors for academic success whilst abroad - and also for forming social relationships within the adopted culture. The informants included in this study were all fluent in English to a degree where they could participate in an interview and measure up to the academic requirements set by the university; yet still experienced difficulties communicating and socialising with native Swedes. The implications of this are subject to interpretation. It's possible that requirements for fluency in English differs between academic work and a social context; where socialising with Swedish natives emphasizes cultural nuances that aren't required for passing exams or making oneself understood in an academic setting. Swedish society outside of an academic context may require a different approach to communication, be it in English or Swedish, which international students are not exposed to or are not prepared for upon arriving in Sweden. Informants reported that Swedish natives often preferred communicating in Swedish, even though they were able to communicate in English - and indeed, were more willing to socialize with international students who attempted to speak Swedish than when they attempted to speak English.

It is possible, also, that adaption to Swedish culture, language and society is facilitated by having close relationships with Swedish natives, institutions or organizations, and that such relationships are more effective over longer periods of time. The question then, of course, is what measures can be undertaken to facilitate the acculturation process of international students who visit Sweden for only one or two semesters in order to ensure that they are healthy and happy during their stay, and thus able to fully appreciate and integrate the content of their academic pursuits.

An interesting find was that freemover informants, unlike exchange students, relocated to Sweden without financial support from their respective governments, surviving instead on a combination of having employment alongside their studies and/or being partially supported financially by family back in the home culture. Even though lack of finances were reported as a source of stress and anxiety in regards to independence and acculturation, it is possible that freemovers, not having their financial needs covered by government institutions,

are forced to integrate into Swedish society in order to take jobs, which then accelerates the acculturation process and make them adapt more efficiently. As such, while financial hardship may cause stress and suffering among international students, the resulting acculturation stress may possibly lead to a more efficient long-term adaption.

Naturally, socio-economic status, gender, sexuality and ethnicity, amongst other factors, may all contribute to higher or lower levels of acculturation stress and subsequent adaption, which must be taken into consideration when looking at the difficulty an individual has with integrating into a new culture. One could argue that such considerations may be difficult to accurately measure, however, as status and the value of assets may translate poorly from one culture into another.

Mental Health

Several studies have already established that international students are less likely to seek healthcare than domestic students within the same culture (Mori, 2000; Ozer, 2015; Sam & Eide, 1991; Smith & Khawaja, 2011). While this study has not analyzed the healthcare habits of domestic Swedish students, the results gleaned in this study suggests that while international students may suffer from similar symptoms of mental health issues while in Sweden, their previous experiences and cultural variations in how those experiences are interpreted have a large impact in how likely the international student is to seek treatment. Regardless of their inclination towards seeking healthcare, one issue all informants had in common was the difficulty of navigating the Swedish healthcare system.

Informants were generally unaware of how the Swedish healthcare systems functioned, in addition to being unaware of how to gain access to such information. Those informants who did possess a rudimentary understanding of the healthcare system had gained such knowledge either through trial and error, or through having a Swedish native relationship as a resource. Freemovers reported that contact with healthcare institutions had been complex, contradictory and overly bureaucratic, and that no information had been volunteered to them from university officials. Exchange students acknowledged that it was possible that information about healthcare had been imparted upon them by university officials or student volunteers during their orientation days at the very beginning of their first semester, but that if so, such information had been lost due to the sheer magnitude of new things they had to learn upon their arrival in Sweden.

In either case, international students who participated in this study lacked sufficient knowledge about healthcare systems to make use of it when they had a need to, which

suggests that there is room for improvement in how to communicate the existence of various healthcare facilities and institutions towards international students, as well as what services they can provide.

Even when informants knew of the existence of such healthcare institutions, there was considerable confusion and stress regarding the cost of treatment, what treatments were available for international students who did not possess social security identification numbers (called "personnummer" in Sweden), and how to get in contact with the correct facility or institution. Several informants reported that their lack of social security identification prohibited them from gaining access to the primary healthcare institutions, maintained by the counties of Sweden - yet when the author of this thesis contacted the aforementioned institution for clarification, it was reported that the lack of such identification should have no bearing in whether or not an individual would be granted treatment, should there be a need. This suggests that there is a disconnect in what kind of healthcare services are actually available towards international students, and what international students perceive or are informed is available to them - and it might be beneficial for all involved parties to clarify how the healthcare systems work. International students may be less prone to seek psychological treatment than domestic students, but the results of this thesis suggests that this may be, at least in part, due to international students simply not knowing how to seek treatment, rather than being more averse to treatment than domestic students.

Expectations

The disconnect between the idyllic experience an international student may anticipate upon journeying abroad, and the actual reality of academic failure, social and economic hardships or other developments may be a considerable cause of psychological suffering amongst international students, as established by Smith & Khawaja (2011), and impact international students self-esteem (Sibley, Hamilton & Chugh, 2015). The results of this thesis suggested that while expectations upon academic performance and Swedish culture may have been a source of stress and anxiety, expectations of equality and quality of life in Sweden have been fulfilled by those informants who came to Sweden from the Middle-East, were female and/or had disabilities. Perhaps not surprisingly, those informants who perceived their quality of life and personal freedoms having increased since arriving in Sweden instead suffered from stress, anxiety and worry at the prospect of being unable to remain here post-graduation, fearing that they wouldn't be able to find employment or be granted visa extensions.

While some cited discrimination towards their ethnic group or employers' preferences for Swedish natives as possible causes for their hardships in finding employment, the most recurring barrier towards finding a vocation or gaining a position within the university appeared to be the inability to speak Swedish. Despite attending Swedish courses and possessing both previous experience in the workforce from their native culture, as well as formal education in Sweden, several informants expressed feeling worried and stressed about the status of their visa applications - in part because it was a long and uncertain process. Several informants expressed that the time and cost invested in their formal education in Sweden would be wasted were they not able to apply it here, and instead had to return back to their culture of origin. In theory, this could be interpreted to mean that the academic pursuits of these students would have little or no practical application in their native cultures, whilst possibly being an asset to the workforce of their adopted culture. Swedish universities might possibly have much to gain by scrutinizing the ways in which the alumnus student body apply their learned skills, and how to best capture and maintain those skills within the university itself.

Loneliness

All informants reported having felt lonely for a prolonged period of time at least once during their stay in Sweden. Some reported feelings of depression, insomnia, and suicidal ideation as a direct result of feeling lonely, while others expressed a disappointment and resignation, either in themselves or an externalized cause for their loneliness, including discrimination, the cultural sociability of Swedish natives, or personal failures to have been extroverted enough to garner the attention of other people.

The implications of loneliness are potentially serious. The results of this study suggests that having a native Swede as a social resource has enabled informants to at least partially navigate the Swedish healthcare system, whereas those informants who lacked such resources suffered in solitude. Furthermore, those informants who socialised with other students, international or domestic, reported being more satisfied with their study period in Sweden, explaining that they felt integrated and appreciated Swedish people and culture. This held true for both freemovers and exchange students.

Informants reported that relationships with Swedish natives felt more genuine, authentic and valuable than relationships with other international students, independent of whether the relationships were with international students from the same culture as the informant. Some informants explained that relationships made with native Swedes helped

their understanding of Swedish society and culture, which had been a reason for why they decided to visit Sweden to begin with, while other informants explained that social relationships with Swedes were a conscious choice, whereas social relationships with other internationals occured by chance. Swedish natives were perceived as introverted, shy, selfish or cold, while relationships with Swedish natives were simultaneously idealised as a "truer" or "more authentic" kind of friendships. One could speculate that the seemingly large effort required to befriend native Swedes would make the international student value such relationships higher, or hold them in higher regard. Several informants proudly exclaimed how many Swedish friendships they had, which may suggest that in some cultures or settings, such relationships may be a source of status or pride. Perhaps the practical implications of having a Swedish social resources, enabling the international student to easier navigate Swedish society, is in itself a reason for why such relationships appear so highly valued, and the inability of forming such a relationship may explain the vilification of the native Swede as a cold, uncaring and selfish person.

Other informants interpret the social demeanour of Swedish natives as a cultural expression of respect or politeness, and don't necessarily interpret the behaviour of domestic Swedes as malignant or ego-centric. Perhaps coincidentally, those informants who described native Swedes as cold had few or no social relationships with native Swedes, while those informants who described native Swedes as polite, authentic or friendly also reported having more and/or deeper social relationships with native Swedes.

Limitations

Whilst coming from varied backgrounds, the seven informants included in this study all possessed vastly different experiences of mental health issues, had varied ways in which they dealt with those issues, and were not homogenous in how the Swedish context impacted these experiences and behaviours. Furthermore, while the informants were from 7 different countries, those countries are not necessarily representative of the international student population in Sweden as a whole. There may also be significant differences between the experiences of individuals from the same nation or culture, based on gender, religion, socioeconomic status or other variables, which were not taken into account. The Swedish context itself may also vary depending on season, location, and political and cultural clime of the nation, time or world at large.

It is important to acknowledge such limitations both in the presence, and going forward.

Practical Implications

Though previous studies establish that international students are less likely to seek treatment for mental health issues during their studies abroad, the results of this study suggests that in a Swedish context this may be in part due to international students lacking sufficient knowledge about healthcare systems in order utilize them. The author of this thesis postulates that establishing programs targeting international students with information about mental health issues, and access to healthcare could potentially improve the health of the student body, and as a direct result improve the quality of education the international student receives from the university.

Future Research

While research into immigration, acculturation and adaption has increased in recent years, the majority of such studies have focused on refugees or migrant workers. Furthermore, while studies have been performed on international students in a Nordic setting, they haven't been performed in Sweden. Being potentially culturally different from Norway and Denmark, where such studies have been performed, it might be prudent to examine how international students fare mentally while enrolled in institutions of higher learning in a Swedish context.

The results of this study suggests that international students may experience difficulties in navigating the Swedish healthcare systems, and future studies may attempt to discern what practical improvements could be made to bring clarity and transparency of healthcare systems towards this population.

Conclusion

The results of this study are in line with previous studies performed of international students studying abroad in that they appear unlikely to seek or receive healthcare for mental health issues. The results of this thesis suggest that this may be, in part, due to an inability to navigate the Swedish healthcare system, rather than a cultural unwillingness to seek treatment for Psychological illness or mental health problems.

Furthermore, the impact of the Swedish context on the mental health of these individuals appears to materialize in part due to how Swedish healthcare is understood and presented on an organizational level, and in part due to how Swedish culture can be perceived as unwelcoming by international students in light of their cultural background.

Reference List

Allen, F.C.L. & Cole, J. B. (1987). Foreign Student Syndrome: Fact or Fable? *Journal of American College Health* Vol. 35:1 (1987). Lincoln Institute of Health Sciences,

Melbourne, DOI: 10.1080/07448481.1987.9938986

Arthur, N. (1997). Counselling Issues with International Students. *Canadian Journal of Counselling/Revue canadienne de counselling*, Vol. 31:4 (1997), (pp.259-272). Calgary.

Berry, J.W. (2005). Acculturation: Living successfully in two cultures. *International Journal of Intercultural Relations* 29 (2005), (pp. 697-712). Elsevier, Kingston.

Braun, V. & Clarke, V. (2006). Using Thematic analysis in psychology. *Qualitative Research in Psychology*, *3:2*, *77-101*. doi: 10.1191/1478088706qp063oa.

Flaskerud, J. (1986). The effects of culture-compatible Internvention on the utilization of mental health services by minority clients. *Community of mental health journal*, Vol. 22:2 (1986).

Langemar, P. (2008). *Kvalitativ forskningsmetod i psykologi - att låta en värld öppna sig*. Liber AB: Stockholm.

Mori, S. (2000). Addressing the mental health concerns of international students. *Journal of counseling & development*, Vol 78 (2000).

Ozer, S. (2015). Predictors of international students' psychological and sociocultural adjustment to the context of reception while studying at Aarhus University, Denmark. *Scandinavian Journal of Pscyhology*, Vol 56 (2015). (pp. 717-725).

Rodriguez, J. (2012, February 19). Difference between being an Erasmus and being a Free-mover [Web log post]. Retrieved April 22, 2018, from LNU.se

Sam, D. D. & Berry, J.W. (2010). Acculturation: When individuals and Groups of Different Cultural Backgrounds Meet. *Perspectives on Psychological Science*, 2010.

Doi: 10.1177/1745691610373075

Sam, D. L & Eide, R. (1991). Survery of Mental Health of Foreign Students. *Scandinavian Journal of Psychology*, 32 (pp.22-30).

Sibley, J., Hamilton, D. & Chugh, R. (2015). International Student Wellbeing and Academic Progress. ISEJ – International Student Experience Journal, Vol 3(2), (2015).

Smith, R. A. & Khawaja, N. G. (2011). A review of the acculturation experiences of international students. *International Journal of Intercultural Relations*, vol 35. (2011). (pp. 699-713).

Skolverket, *Läroplaner, ämnen och kurser*. Retrieved 2018-04-22 from https://www.skolverket.se/laroplaner-amnen-och-kurser/grundskoleutbildning/grundskola/engelska

Appendix A.

Hello!

My name is Jay, and I'm studying to become a clinical psychologist. I'm currently writing my master's thesis, focusing on mental health amongst international students in Sweden. I would like to get in touch with international students in Sweden who are currently, or have in the past, suffered from feelings of anxiety, depression, loneliness or otherwise felt bad during their studies here in Sweden, and would like to share their experiences.

If you'd be willing to participate in an anonymous interview, or if you know someone who would like to, please don't hesitate to get in touch. I can be reached at ja222ws@student.lnu.se .

All interviews are confidential. :)

Regards;

- Jay A-singhe

Appendix B.

Stats.

Gender Age Nationality Level of studies Current medications -

A) What can you tell me of your overall emotional experience regarding your studies in Sweden?

What, if anything, was particularly difficult to adjust to?

What, if anything, was easier to adjust to?

What can you tell me about your feelings about your time in Sweden?

What can you tell me about your (feeling)?

What do you think caused it?

Did it exist prior to your visit to Sweden?

How did you handle your (feeling)? What helped/Didn't help?

How do you feel today?

B) Upon arriving in Sweden, what expectations did you have of Swedish culture and society?

To what degree did your experience live up to your expectations?

What did you know about Swedish healthcare?

How much information did you receive about Swedish healthcare? How did you receive this information?

Did you ever seek professional aid? Why/Why not? What kind?

What can you tell me about the availability and quality of the healthcare you received?

C) Did the host university play any part in helping you during your more difficult times?

How were they helpful/unhelpful?

What could the university have done to help you further?

D) Is there anything that I have not asked you, that you would like me to know?

What/Whv?

Do you have any questions for me?

Thank you for your participation.

Beck Anxiety Inventory

Below is a list of common symptoms of anxiety. Please carefully read each item in the list. Indicate how much you have been bothered by that symptom during the past month, including today, by circling the number in the corresponding space in the column next to each symptom.

заон зутрют.	Not At All	Mildly but it didn't bother me much. 1	Moderately - it wasn't pleasant at times 2	Severely – it bothered me a lot 3
Numbness or tingling				
Feeling hot				
Wobbliness in legs				
Unable to relax				
Fear of worst happening				
Dizzy or lightheaded				
Heart pounding/racing				
Unsteady				
Terrified or afraid				
Nervous				
Feeling of choking				
Hands trembling				
Shaky / unsteady				
Fear of losing control				
Difficulty in breathing				
Fear of dying				
Scared				
Indigestion				
Faint / lightheaded				
Face flushed				
Hot/cold sweats				
Column Sum				

Scoring - Sum each column. Then sum the column totals to achieve a grand score. Write grand score here _______.

Appendix D.

Participation in a study regarding international student's experiences of anxiety and

depression during their studies at the Linnaeus University in Växjö, Sweden.

Thank you for choosing to participating in this interview. You are about to be asked questions

regarding your experiences during your time as a student at Linnaeus University in Växjö.

The purpose of this interview is to gain better insight into the experiences of international

students who suffer from feelings of loneliness or malaise during their studies at the Linnaeus

University.

This interview will be recorded for transcription, but will not be heard by anyone other than

the author of this thesis. All recorded material will be destroyed after the study is completed.

Your name, identity or any personal information will be obfuscated and omitted from the

final paper. You are free to terminate your participation in this interview at any time, should

you so choose. You are also free to decline to answer any questions that you do not wish to

answer. Your participation in this interview is entirely confidential.

Thank you for your participation.

- Jay Amarasinghe

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